

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 15  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**HEALTHCARE DISTRIBUTION ALLIANCE POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLENAGH, ELIZABETH, , ,**

Mailing Address 1700 Mason Hill Drive

City  
Alexandria

State  
VA

Zip Code  
22307-1931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HDA

Occupation (for Individual)  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 31 / 2019

**Transaction ID : PR431096720730**

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$150.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BITTMAN, ANN, , Ms.,**

Mailing Address 8125 Kerry Lane

City  
Chevy Chase

State  
MD

Zip Code  
20815-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HDA

Occupation (for Individual)  
Executive Vice President & COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2088.00

Date of Receipt

05 / 31 / 2019

**Transaction ID : PR431104120730**

Amount of Each Receipt this Period

416.00

☐ Memo Item

P/R Deduction (\$208.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUCCA, ANITA, , ,**

Mailing Address 10508 Grove Ridge Place

City  
Rockville

State  
MD

Zip Code  
20852-4656

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HDA

Occupation (for Individual)  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

05 / 31 / 2019

**Transaction ID : PR431114120730**

Amount of Each Receipt this Period

106.00

☐ Memo Item

P/R Deduction (\$53.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

822.00