

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

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

FOR LINE NUMBER: PAGE 11 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Neurology BrainPAC

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

A. Lee, Ikjae, , Dr.,

Mailing Address 3408 Surrey Hill Ln

City  
VestaviaState  
ALZip Code  
35243-1729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Alabama BirminghamOccupation (for Individual)  
Neurologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2019

Transaction ID : 43339921

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Loftus, Brian, D., Dr.,

Mailing Address 6700 West Loop S Ste 330

City  
BellaireState  
TXZip Code  
77401-4138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bellaire Neurology, PAOccupation (for Individual)  
Neurologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2019

Transaction ID : 43347232

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Finney, Glen, R., Dr.,

Mailing Address 828 Homestead Dr

City  
DallasState  
PAZip Code  
18612-7227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Geisinger Specialty ClinicOccupation (for Individual)  
Behavioral Neurology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2019

Transaction ID : 43348944

Amount of Each Receipt this Period

208.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

558.34