

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

American Society of Anesthesiologists Political Action Committee (ASA PAC)

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

A. Torline, Ronald, , ,

Mailing Address 14109 Kessler St

City

Overland Park

State

KS

Zip Code

66221-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KUAF

Occupation (for Individual)

Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2019

Transaction ID : 45A988CEC5423A1D5BF5

Amount of Each Receipt this Period

8.33

☐ Memo Item

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

B. Tountas, Melissa, , ,

Mailing Address 2907 Dorell Ave

City

Orlando

State

FL

Zip Code

32814-6758

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USAP/Florida

Occupation (for Individual)

Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2019

Transaction ID : 4C3090F30D05585E49A8

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

C. Troianos, Christopher, , ,

Mailing Address 2 Haskell Dr

City

Bratenahl

State

OH

Zip Code

44108-1166

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cleveland Clinic

Occupation (for Individual)

Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2019

Transaction ID : 4A2B824B12ADE2C1D383

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

133.32

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