

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

PAGE 78 OF 125

<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			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE

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

A. Davis, Edward, C., Dr.,

Mailing Address 1120 Blakely Ct

City
West ColumbiaState
SCZip Code
29170-3511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Orthodontist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2019

Transaction ID : 13443196

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Martone, Valerie, D., Dr.,

Mailing Address 151 College Ave

City
BeaverState
PAZip Code
15009-2742FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Orthodontist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2019

Transaction ID : 13443197

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Beckwith, Phillip, J., Dr.,

Mailing Address 6739 Cooperstone Dr

City
DublinState
OHZip Code
43017-5237FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Orthodontist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2019

Transaction ID : 13443198

Amount of Each Receipt this Period

148.00

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

348.00

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