

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

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

**A. HARRIS, PATRICE, A, , MD**

Mailing Address 1397 WOOD POND CV

City  
STONE MTN

State  
GA

Zip Code  
30083-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2020

Transaction ID : A1E3F011777EB41A5815

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**B. HOVER, ALEXANDER, R, , JR MD**

Mailing Address 2115 S FREMONT AVE  
STE 3300

City  
SPRINGFIELD

State  
MO

Zip Code  
65804-2246

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCY CLINIC GASTROENTEROLOGY

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2020

Transaction ID : AA2C15A0341FC4E79BCF

Amount of Each Receipt this Period

220.00

☐ Memo Item

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

**C. IMBEAU, STEPHEN, ALAN, , MD**

Mailing Address 800 E CHEVES ST  
STE 420

City  
FLORENCE

State  
SC

Zip Code  
29506-2649

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLERGY ASTHMA & SINUS CENTER

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2020

Transaction ID : A331EC9EB0F67443AB83

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

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

636.66