

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

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

FOR LINE NUMBER: PAGE 151 OF 174

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Optometric Association Political Action Committee

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

A. Bannon, Joseph, M, Dr.,

Mailing Address 211 Greentree Dr

City
St Clairsville

State
OH

Zip Code
43950-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2019

Transaction ID : 44055062

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Linsley, Glen, A, Dr.,

Mailing Address 1815 W Dansville Rd

City
Mason

State
MI

Zip Code
48854-8602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2019

Transaction ID : 44055064

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. Willette, Matthew, B, Mr.,

Mailing Address 1505 Prince Street, Ste. 300

City
Alexandria

State
VA

Zip Code
22314-2874

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

American Optometric Association

Occupation (for Individual)

Director Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY
09 / 27 / 2019

Transaction ID : 44055076

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

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

530.00