

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

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

FOR LINE NUMBER: PAGE 89 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Harris, William, , ,

Mailing Address 3120 Legacy Trce

City
CincinnatiState
OHZip Code
45237-1724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seven Hills AnesthesiaOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2018

Transaction ID : 49F2989C78ED65DAE10D

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

B. Harris, William, , ,

Mailing Address 3120 Legacy Trce

City
CincinnatiState
OHZip Code
45237-1724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seven Hills AnesthesiaOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2018

Transaction ID : 4C468E4E3AFF58A2E7B6

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

C. Harwood, Michael, , ,

Mailing Address 1100 Park Pl

City
ZionsvilleState
INZip Code
46077-1058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Southeast Anesthesiologists, P.C.Occupation (for Individual)
Physician Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2018

Transaction ID : 4A1DAB890B6C6678708D

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

166.65

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