

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

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

FOR LINE NUMBER: PAGE 11 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 College of Surgeons Professional Association PAC

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

A. Cribari, Chris, , ,

Mailing Address 2500 Rocky Mountain Ave

North Medical Office Building, Sui

City

Loveland

State

CO

Zip Code

80538-9004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Surgical Specialists of the Rockies

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2018

Transaction ID : 4E9C918C2E24F68AE3D1

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Croce, Martin, Alexander, ,

Mailing Address Univ of Tennessee Dept of Surg Sui

City

Memphis

State

TN

Zip Code

38163-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UTHSC

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2018

Transaction ID : 4775BC657BDF30089968

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

C. Davis, William, H., ,

Mailing Address 258 Adams Rd

City

Chula

State

GA

Zip Code

31733-4322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Good Circulation, LLC

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2018

Transaction ID : 480DB117F2CFECF352B8

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

246.66

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