

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)

PAGE 75 OF 295

☒ 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. Early, Robert, , Jr

Mailing Address 301 S 7th Ave
Ste 235

City
West Reading

State
PA

Zip Code
19611-1453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reading Anesthesia Associates

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2017

Transaction ID : 3613587

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Easdown, Jane, ,

Mailing Address 5106 Cornwall Dr

City
Brentwood

State
TN

Zip Code
37027-5119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
vanderbilt

Occupation (for Individual)
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2017

Transaction ID : 3609733

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Ebert, Thomas, ,

Mailing Address 5000 W National Ave
Anesthesiology, 112A

City
Milwaukee

State
WI

Zip Code
53295-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
medical college of wisconsin

Occupation (for Individual)
anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2017

Transaction ID : 3610081

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1500.00