

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 Nurses Association PAC

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

A. Luzmoor, Kathryn, M.,

Mailing Address 425 Centennial Dr

City
Green River

State
WY

Zip Code
82935-5527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2019

Transaction ID : A66F9FAF83CFF4048B91

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Martz, Deborah, , Ms.,

Mailing Address 2483 Ansley St

City
Alliance

State
OH

Zip Code
44601-4404

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2019

Transaction ID : A3284724C5C1C49EA949

Amount of Each Receipt this Period

1200.00

☐ Memo Item

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

C. Messmer, Patricia, , ,

Mailing Address 4300 Jackson St

City
Hollywood

State
FL

Zip Code
33021-7218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Miami Dade College, School of Nursing

Occupation (for Individual)
Consultant for Nursing Education & Res

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2019

Transaction ID : A4758F111D9274EB29D3

Amount of Each Receipt this Period

780.00

☐ Memo Item

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

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

2230.00