SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 43
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Surgeons Professional Association PAC

A. Full Name (Last, First, Middle Initial)
Margaret M. Dunn

Mailing Address 128 E Apple St
Wright State Univ Department of Su

City	State	Zip Code
Dayton	OH	45409-2902

FEC ID number of contributing
federal political committee. **C**

Name of Employer
Wright State University School of Medi

Occupation
Surgeon

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : 4446AACAB003D8FE76F4

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Stephen B. Edge

Mailing Address Baptist Cancer Center
Baptist Memorial Health Care Corpo

City	State	Zip Code
Memphis	TN	38120

FEC ID number of contributing
federal political committee. **C**

Name of Employer
Roswell Park Cancer Institute

Occupation
Surgeon

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : 5FB4909B254017D0E03

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
David Thomas Efron

Mailing Address Johns Hopkins Hospital
Sheikh Zayed Tower, Suite 6107F

City	State	Zip Code
Baltimore	MD	21287-0001

FEC ID number of contributing
federal political committee. **C**

Name of Employer
Johns Hopkins Univ

Occupation
Surgeon

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : 6B68F656FC5CEF2C054

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)............................ ▶ 625.00

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