

# **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 Society of Anesthesiologists Political Action Committee (ASA PAC)**

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

**A. Baysinger, Curtis, , ,**

Mailing Address 1211 Medical Center Dr

City  
Nashville

State  
TN

Zip Code  
37232-0004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vanderbilt University Medical Center

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 Y  
10 / 20 / 2019

**Transaction ID : D0A02C82-D9A8-468B-**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Beaman, Shawn, , ,**

Mailing Address 806 Huron Ct

City  
Gibsonia

State  
PA

Zip Code  
15044-8039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UPMC

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 Y  
10 / 20 / 2019

**Transaction ID : 70E48E78-56F3-4142-**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. Beck, Michael, , ,**

Mailing Address 1705 E Fort Douglas Cir

City  
Salt Lake City

State  
UT

Zip Code  
84103-4451

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MWA

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2019

**Transaction ID : 4D4D94BBE7B755C7F728**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

2050.00