

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

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

FOR LINE NUMBER: PAGE 136 OF 303
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Charles D Hummer III, MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1157 Avonlea Circle
 City State Zip Code
 Glen Mills PA 19342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Premier Orthopaedics Orthopaedic Surgeon
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2014
Transaction ID : 5769564
 Amount of Each Receipt this Period
 1000.00

B. Edward R McDevitt MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3116 Drogue Ct
 City State Zip Code
 Annapolis MD 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bay Area Orthopaedics Orthopaedic Surgeon
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : 5769584
 Amount of Each Receipt this Period
 1000.00

c. Steven Douglas K Ross MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 Wildhorse
 City State Zip Code
 Orange CA 92869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Univ of California Orthopaedic Surgeon
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : 5771379
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶