

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 Hospital Association PAC

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

A. Sullivan, Thomas, , Mr.,

Mailing Address 100 South Street

City
Southbridge

State
MA

Zip Code
01550-4051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Harrington Hospital

Occupation (for Individual)
Vice President Fiscal Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 26 / 2018

Transaction ID : 24828543

Amount of Each Receipt this Period

262.50

☐ Memo Item

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

B. Moloney, Ellen, , Ms.,

Mailing Address 38 Whitney Avenue

City
Beverly

State
MA

Zip Code
01915-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Newton-Wellesley Hospital

Occupation (for Individual)
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 26 / 2018

Transaction ID : 24828544

Amount of Each Receipt this Period

375.00

☐ Memo Item

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

C. Roach, Steven, P, Mr., MBA, FACHE

Mailing Address 157 Union Street

City
Marlborough

State
MA

Zip Code
01752-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UMass Memorial-Marlborough Hospital

Occupation (for Individual)
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 26 / 2018

Transaction ID : 24828546

Amount of Each Receipt this Period

375.00

☐ Memo Item

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

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

1012.50