

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)

U.S. Anesthesia Partners, Inc. PAC d/b/a/ USAP PAC

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

A. Cavanaugh, Mark, , ,

Mailing Address 6116 Maxie St

Unit A

City

Houston

State

TX

Zip Code

77007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USAP

Occupation (for Individual)

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : SA11AI.6108

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Payroll Deductions

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

B. Chan, Jay, , ,

Mailing Address 10137 Henbury Street

City

Orlando

State

FL

Zip Code

32832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USAP

Occupation (for Individual)

Physician

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
07 / 31 / 2019

Transaction ID : SA11AI.6110

Amount of Each Receipt this Period

250.00

☐ Memo Item

Payroll Deductions

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

C. Chappell, Eric, , ,

Mailing Address 10856 S. FM 1187

City

Fort Worth

State

TX

Zip Code

76126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USAP

Occupation (for Individual)

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2019

Transaction ID : SA11AI.6114

Amount of Each Receipt this Period

600.00

☐ Memo Item

Payroll Deductions

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

2050.00

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