

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 118

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

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

A. MALIK, MASUD, IQBAL, , MD

Mailing Address 3865 N MULFORD RD

 City
 ROCKFORD

 State
 IL

 Zip Code
 61114-5603

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 EYE SPECIALISTS OF ROCKFORD

 Occupation (for Individual)
 PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 208.38

Date of Receipt

 M M / D D / Y Y Y Y
 05 / 06 / 2019

Transaction ID : AAC5DA4AEF86457F9B1

Amount of Each Receipt this Period

 41.66
☐ Memo Item

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

B. MC KELVEY, CARLA, D, , MD

 Mailing Address 1010 1ST ST SE
 STE 110

 City
 BANDON

 State
 OR

 Zip Code
 97411-9301

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 NORTH BEND MEDICAL CENTER INC

 Occupation (for Individual)
 PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 208.63

Date of Receipt

 M M / D D / Y Y Y Y
 05 / 06 / 2019

Transaction ID : AC0228F9B4031466B973

Amount of Each Receipt this Period

 41.74
☐ Memo Item

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

C. MILSTEIN, MARK, JOSEPH, , MD

 Mailing Address 111 E 88TH ST
 APT 4F

 City
 NEW YORK

 State
 NY

 Zip Code
 10128-1158

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 MONTEFIORE MEDICAL CENTER

 Occupation (for Individual)
 PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 208.62

Date of Receipt

 M M / D D / Y Y Y Y
 05 / 06 / 2019

Transaction ID : A841DAEBF36614403818

Amount of Each Receipt this Period

 41.74
☐ Memo Item

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

 125.14
TOTAL This Period (last page this line number only)..... ►