

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

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

FOR LINE NUMBER: PAGE 35 OF 177

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

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

A. Collazo-Ornes, Pedro, , ,

Mailing Address 3 Nairn St Cond Oceanica Apt 9

City
San JuanState
PRZip Code
00907-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SP Radiology, LLC

Occupation (for Individual)

Diagnostic Radiologist

Receipt For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 20 / 2019

Transaction ID : C3932537

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Collins, Denise, DeBrule, , MD, FACR

Mailing Address 826 Edgemont Run

City
Bloomfield HillsState
MIZip Code
48304-1458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Henry Ford Medical Group

Occupation (for Individual)

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2019

Transaction ID : C3930595

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Collins, Michelle, S, , MD

Mailing Address 1211 Mosley Rd

City
GreensboroState
NCZip Code
27455-3485FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

102.67

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 12 / 2019

Transaction ID : C3942200

Amount of Each Receipt this Period

102.67

☐ Memo Item

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

222.67

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