

# **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 College of Radiology Association PAC**

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

**A. Patel, Kirang, , ,**

Mailing Address 3 Colonial Ct

City  
Frisco

State  
TX

Zip Code  
75034-6800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Missouri at Kansas City

Occupation (for Individual)  
Diagnostic Radiologist

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

MM / DD / YYYY  
08 / 21 / 2019

**Transaction ID : C3934957**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Patel, Rita, S, ,**

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hackensack Radiology Group

Occupation (for Individual)  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.48

Date of Receipt

MM / DD / YYYY  
08 / 01 / 2019

**Transaction ID : C3942137**

Amount of Each Receipt this Period

17.86

☐ Memo Item

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

**C. Patel, Rita, S, ,**

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hackensack Radiology Group

Occupation (for Individual)  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.48

Date of Receipt

MM / DD / YYYY  
08 / 15 / 2019

**Transaction ID : C3942277**

Amount of Each Receipt this Period

17.86

☐ Memo Item

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

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

55.72