

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

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

FOR LINE NUMBER: PAGE 168 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. Watts, John, A, , Dr.

Mailing Address 195 Walter Jessup Ct

City

Greensboro

State

NC

Zip Code

27455-3072

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Greensboro Radiology

Occupation (for Individual)

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

331.07

Date of Receipt

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

Transaction ID : C3942244

Amount of Each Receipt this Period

177.21

☐ Memo Item

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

B. Watts, Jonathan, , , Dr.

Mailing Address 8140 Sangiovese Dr

City

Kernersville

State

NC

Zip Code

27284-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Greensboro Radiology PA

Occupation (for Individual)

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

331.07

Date of Receipt

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

Transaction ID : C3942245

Amount of Each Receipt this Period

177.21

☐ Memo Item

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

C. WehmueLLer, Michael, Douglas, ,

Mailing Address 1409 Greenway Dr

City

Shelby

State

NC

Zip Code

28150-6215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2019

Transaction ID : C3942348

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

474.42

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