

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

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

FOR LINE NUMBER: PAGE 9 OF 202

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Surgeons Professional Association PAC

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

A. Bahnson, Robert, R., ,

Mailing Address 915 Olentangy River Rd

Osu Dept of Urology Ste 2000

City

Columbus

State

OH

Zip Code

43212-3153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio State University

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2019

Transaction ID : 8E7E7F3B3E23420B9039

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Bailey, H., Randolph, ,

Mailing Address 6550 Fannin St

Ste 2307

City

Houston

State

TX

Zip Code

77030-2723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2019

Transaction ID : E9C92D0623A9411B9159

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. Bailey, Patrick, Vance, ,

Mailing Address 20 F St NW

American College of Surgeons, Ste

City

Washington

State

DC

Zip Code

20001-6701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American College of Surgeons

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2019

Transaction ID : 4F9AB203FCFC0FD7CB5B

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

1700.00