

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

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

FOR LINE NUMBER: PAGE 27 OF 107

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Society of Association Executives (ASAE) APAC

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

A. Palmisano, Donald, , Mr., Jr.

Mailing Address 1849 The Exchange #200

City
AtlantaState
GAZip Code
30339-2027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medical Association of GeorgiaOccupation (for Individual)
Executive Director - CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 31 / 2019

Transaction ID : 12936424

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Blake, Patricia, V., Ms., FASAE, CAE

Mailing Address 1325 G Street, NW
Suite 400City
WashingtonState
DCZip Code
20005-3121FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Heart Rhythm SocietyOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 30 / 2019

Transaction ID : 12936425

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Caldeira, Stephen, J., Mr.,

Mailing Address 1667 K Street NW
Suite 300City
WashingtonState
DCZip Code
20006-1647FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Household & Commercial Products AssociOccupation (for Individual)
President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 11 / 2019

Transaction ID : 12936426

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00