

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

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

FOR LINE NUMBER: PAGE 13 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Proliance Surgeons PAC**

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

**A. Marsh, Robert, , ,**

Mailing Address 2641 16th Ave Ct SE

City  
Puyallup

State  
WA

Zip Code  
98372

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Proliance Surgeons

Occupation (for Individual)  
Physician

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2018

**Transaction ID : C4812572**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**B. McAdam, Michael, K., ,**

Mailing Address 2614 39th Ave W

City  
Seattle

State  
WA

Zip Code  
98199

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Proliance Surgeons

Occupation (for Individual)  
Physician

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2018

**Transaction ID : C4812463**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**C. McAdam, Michael, K., ,**

Mailing Address 2614 39th Ave W

City  
Seattle

State  
WA

Zip Code  
98199

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Proliance Surgeons

Occupation (for Individual)  
Physician

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2018

**Transaction ID : C4812541**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00