

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

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

FOR LINE NUMBER: PAGE 14 OF 26

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Nurses Association PAC

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

A. Jones, Faith, M.,

Mailing Address 476 N Douglas St

City
PowellState
WYZip Code
82435-1812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hts3

Occupation (for Individual)

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2019

Transaction ID : AE5E0748C66204A0DAF7

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Martz, Deborah, , Ms.,

Mailing Address 2483 Ansley St

City
AllianceState
OHZip Code
44601-4404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2019

Transaction ID : A83F8FD29D4BF4877A3E

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Melvin, Tonisha, Toni, Dr.,

Mailing Address 5824 Carriage Hills Dr

City
MartinezState
GAZip Code
30907-8226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cnvamc

Occupation (for Individual)

Nurse Practitioner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : AE3968DDE07EB4701BFF

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

500.00

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