

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 54
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal)

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

A. Brabon, David, , , MD

Mailing Address 220 S. Lexington Ave.

City
WilmoreState
KYZip Code
40390FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PhysicianOccupation (for Individual)
Rockcastle Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2017

Transaction ID : SA11Al.7277

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Brabon, David, , , MD

Mailing Address 220 S. Lexington Ave.

City
WilmoreState
KYZip Code
40390FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PhysicianOccupation (for Individual)
Rockcastle Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : SA11Al.7314

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Bunnell, Nancy, , Mrs., MD

Mailing Address 3246 New Orleans

City
EdgewoodState
KYZip Code
41017FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2017

Transaction ID : SA11Al.7213

Amount of Each Receipt this Period

68.75

☐ Memo Item

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

88.75

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