

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

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

FOR LINE NUMBER: PAGE 24 OF 58

(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 Academy of Family Physicians Political Action Committee**

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

**A. Luther, Jeffrey, S., MD, FAAFP**

Mailing Address 450 E Spring St  
Ste 1

City  
Long Beach

State  
CA

Zip Code  
90806-1625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Family Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY  
09 / 24 / 2019

**Transaction ID : C3953094**

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

**B. Madrid, Glenn, Manuel, MD, FAAFP**

Mailing Address 3835 Horizon Glen Ct

City  
Grand Junction

State  
CO

Zip Code  
81506-5425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Family Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY  
09 / 24 / 2019

**Transaction ID : C3953097**

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

**C. Markovich, Renee, L., MD, FAAFP**

Mailing Address 1 Akron General Ave  
Akron General Center for Family Me

City  
Akron

State  
OH

Zip Code  
44307-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Akron General Medical Center

Occupation (for Individual)  
Family Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY  
09 / 24 / 2019

**Transaction ID : C3953096**

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

1095.00