

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **1** OF **20**
 (check only one)
 11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Association of child & Adolescent Psychiatry Political Action Committee (AACAP-PAC)

Full Name (Last, First, Middle Initial)

A. **Aba Nduom, Nana**

Mailing Address

2516 Yale Ave East Unit A
 City State Zip Code
Seattle WA 98102

Date of Receipt

11 / 04 / 2014

Amount of Each Receipt this Period

20.00

FEC ID number of contributing federal political committee.

C

Name of Employer

Univ. of Washington

Occupation

Physician

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Full Name (Last, First, Middle Initial)

B. **Arnold, Judith**

Mailing Address

3334 N. Main St
 City State Zip Code
Racine WI 53402

Date of Receipt

10 / 25 / 2014

Amount of Each Receipt this Period

200.00

FEC ID number of contributing federal political committee.

C

Name of Employer

Aurora Medical Group

Occupation

Psychiatrist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Full Name (Last, First, Middle Initial)

C. **Axelson, Allan**

Mailing Address

2370 Morrow Road
 City State Zip Code
Pittsburgh PA 15241

Date of Receipt

11 / 19 / 2014

Amount of Each Receipt this Period

100.00

FEC ID number of contributing federal political committee.

C

Name of Employer

Receipt For:

Primary General
 Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

100.00

SUBTOTAL of Receipts This Page (optional) ▶

320.00

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