

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

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

FOR LINE NUMBER: PAGE 38 OF 68  
(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)  
**HCA INC. GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial)  
**A. Gary Malaer**

Mailing Address 4539 River Close Blvd

City Valrico State FL Zip Code 33596

FEC ID number of contributing federal political committee. **C**

Name of Employer South Bay Hospital Occupation COO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : SA11AI.30518**

Amount of Each Receipt this Period  
 350.00

Full Name (Last, First, Middle Initial)  
**B. Adam Martin**

Mailing Address 919 Stuart Lane

City Brentwood State TN Zip Code 37027

FEC ID number of contributing federal political committee. **C**

Name of Employer Terre Haute Regional Occupation Controller

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : SA11AI.30292**

Amount of Each Receipt this Period  
 350.00

Full Name (Last, First, Middle Initial)  
**C. Leigh Massengill**

Mailing Address 15319 Lake Maurvine Dr

City Odessa State FL Zip Code 33556

FEC ID number of contributing federal political committee. **C**

Name of Employer Community Hospital Occupation CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : SA11AI.30376**

Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

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