

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

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

FOR LINE NUMBER: PAGE 1321 OF 1657
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Right to Rise USA

Full Name (Last, First, Middle Initial)
A. ASSOCIATED HEALTHCARE MANAGEMENT, INC.
 Mailing Address 320 SABAL PALM PLACE SUITE 300
 City State Zip Code
 LONGWOOD FL 32779-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2015
Transaction ID : SA11.108636
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BEN HILL GRIFFIN, INC.
 Mailing Address P.O. BOX 127
 City State Zip Code
 FROSTPROOF FL 33843-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100608.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2015
Transaction ID : SA11.109953
 Amount of Each Receipt this Period
 608.62
 Memo Item
CONTRIBUTION
 IN-KIND: CATERING

Full Name (Last, First, Middle Initial)
C. KOJAIAN MANAGEMENT CORPORATION
 Mailing Address 39400 WOODWARD AVENUE
 SUITE 250
 City State Zip Code
 BLOOMFIELD HILLS MI 48304-5155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 310123.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2015
Transaction ID : SA11.109954
 Amount of Each Receipt this Period
 60123.10
 Memo Item
CONTRIBUTION
 IN-KIND: CATERING/PHOTOGRAPHY

SUBTOTAL of Receipts This Page (optional)..... ▶ 60981.72
TOTAL This Period (last page this line number only)..... ▶