

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

ADDRESS (number and street) **19387 U.S. 19 NORTH**  
▼  
 Check if different than previously reported. (ACC) **Clearwater** **FL** **33764-3102**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** **C00653477** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Clark, Christopher, Lynn, ,  
Type or Print Name of Treasurer

Signature of Treasurer *Clark, Christopher, Lynn, ,* [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="69639.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="95289.66"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8747.44"/>	<input type="text" value="35427.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="104037.10"/>	<input type="text" value="105067.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3515.00"/>	<input type="text" value="4545.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="100522.10"/>	<input type="text" value="100522.10"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2020 To: M M / D D / Y Y Y Y 09 / 30 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6693.48	19078.34
(ii) Unitemized .....	2053.96	16349.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8747.44	35427.78
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8747.44	35427.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8747.44	35427.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8747.44	35427.78

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	15.00	45.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15.00	45.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	4500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3515.00	4545.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3515.00	4545.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8747.44	35427.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8747.44	35427.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15.00	45.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15.00	45.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Abbott, Brian, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18606 Ponciana Ave  
 City Cleveland State OH Zip Code 44135-3946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RHC Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB42C9E4477A3414693F**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Adams, Paula, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2250 Portofino Pl Unit 231  
 City Palm Harbor State FL Zip Code 34683-7752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of Employee Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A157F0E1FCCA14E8E820**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Weekly

**C. Baldrige, Richard, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Quarterpole Ct  
 City Warrenton State VA Zip Code 20186-3072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 307.84

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A1C050EF6717346D187E**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	380.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Butkevitch, Peter, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 725  
 City Gloversville State NY Zip Code 12078-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.56

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AE8E80BCF3FE44E1EB1C**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Capella, Pamela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3034 Catesville Cir  
 City Leland State NC Zip Code 28451-1307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9CF2E3E96B11444EA89**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Chipps, Nicole, Patricia, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Ohio Ave  
 City Girard State OH Zip Code 44420-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A39D5320094C34C40A23**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	184.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Chitwood, Noah, Robert, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3507 W San Pedro St  
 City Tampa State FL Zip Code 33629-7924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of Business Process Impro  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : A6B8F4527FE8446598FE**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
 Payroll Deduction: \$1250.00/Bi-Weekly

**B. DeBord, Charissa, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8957 Antigua Dr  
 City Seminole State FL Zip Code 33777-2141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB680280A466945DAB21**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. DeMello, Lori, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2912 Hampton Place Ct  
 City Plant City State FL Zip Code 33566-9321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) VP, Regional  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB9EBB278A948488BBF1**  
 Amount of Each Receipt this Period 180.00  
 Memo Item  
 Payroll Deduction: \$30.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1464.62
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Dodd, Timothy, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10800 Brighton Bay Blvd NE  
 Apt 11308  
 City Saint Petersburg State FL Zip Code 33716-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Vehicle Fleet  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AAFF07FF6FF4943E2802**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**B. gangemi, deborah, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2970 Pleasant Ave  
 City Hamburg State NY Zip Code 14075-3624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) RVP, National Held Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.96

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A20E57F135E004E73AA5**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**C. Garner, William, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 W 58th St  
 City Casper State WY Zip Code 82601-6508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9F858748EC4C41BE966**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Goldberg, Albert, O, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1202 Valley Rd  
 City Fruitland Park State FL Zip Code 34731-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RHC Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : ABB389E18555C4E67BE8**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Guiette, Jamie, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9529 Oakley Rd  
 City Saint Charles State MI Zip Code 48655-9527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9A78DBB69E4243C5905**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Hagner, Glenda, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3453  
 City Camdenton State MO Zip Code 65020-3453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A39AAD6926B134844999**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	265.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Jarvis, Dawn, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8499 14th St N  
 City St Petersburg State FL Zip Code 33702-7956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A177108382A1543758A2**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**B. Johnson, Susan, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8061 124th Ter  
 City Largo State FL Zip Code 33773-2923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) RVP, Billing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB147F8DD5F8242BC9D0**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**C. Jones, Brian, Edmund, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 179 Escoll Dr  
 City East Stroudsburg State PA Zip Code 18301-9364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A70D5A081D3034137AC0**  
 Amount of Each Receipt this Period 48.00  
 Memo Item  
 Payroll Deduction: \$12.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	288.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Jones, Jodi, Beth, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 Da Vinci Dr  
 City Nokomis State FL Zip Code 34275-4222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Director, National Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.56

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AF8FD476960584536934**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Kelley, Marie, Elizabeth, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13482 Gunsmoke Rd  
 City McCall State ID Zip Code 83638-5174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A270C93844909428BB19**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Larche, Tracy, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10800 Brighton Bay Blvd NE Apt 11308  
 City Saint Petersburg State FL Zip Code 33716-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of Training  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB369DDA4BFA84155A6D**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	184.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Lewis, Hayley, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 64  
 City Salina State UT Zip Code 84654-0064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9498E7B74DB14772B12**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Lizotte, Dennis, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Wildbrook Dr  
 City Biddeford State ME Zip Code 04005-9740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9ABC1FA1AA2F4FEE887**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**C. Mathes, Jennifer, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2346 Eppie Cove Ln  
 City Knoxville State TN Zip Code 37931-4021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A6F329EF7A6EC4025992**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	265.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. McBride, Doug, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 Coleman Rd  
 City Springfield State SD Zip Code 57062-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AE472359A41AB43B4948**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. McGonagill, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1825 Sutherland Dr W  
 City Palm Harbor State FL Zip Code 34683-3452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) National Director, MGNEC CAR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AA004BB63AD9645EB952**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**C. McKenzie, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 Glenroy Ct  
 City Flat Rock State NC Zip Code 28731-9561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Director, Hospital Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 336.75

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A28F43CA57AB343439C5**  
 Amount of Each Receipt this Period 115.50  
 Memo Item  
 Payroll Deduction: \$19.25/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 25
<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Mohammed, Shiraz, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17306 Ladera Estates Blvd  
 City Lutz State FL Zip Code 33548-4816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of HR and Payroll  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A4435BF291C0643678AF**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Monroe, Donald, A, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4923 Cedarhurst Rd  
 City Toledo State OH Zip Code 43613-3028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A989333FFF9D74FE9984C**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Weekly

**C. Moreau, sandra, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16226 Muirfield Dr  
 City Odessa State FL Zip Code 33556-5431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, NHC Services  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 307.84

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AB9A8B344424D4978A5B**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	380.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 25
<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Newbeck, Patrick, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6105 Royal Birkdale Dr  
 City Lake Worth State FL Zip Code 33463-6525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : ABCB91F1FF60A4887AFC**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Weekly

**B. Patterson, Marcus, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Plantation Dr  
 City Mayflower State AR Zip Code 72106-8419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A15BE1276A32F4906AEF**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Payne, Mary, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4215 Alderwood Ln  
 City Charlotte State NC Zip Code 28215-9508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Region  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A0C61AD1733C14C12982**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	304.62
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Pedersen, Jennifer, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18412 Keystone Manor Rd  
 City Odessa State FL Zip Code 33556-4836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Chief Compliance Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AC83A9456686E459F816**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Weekly

**B. Perry, Kellie, Rosser, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 Rosser Rd  
 City Covington State GA Zip Code 30016-4178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Privacy Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A3F4800A065894D1EA3E**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**C. Peterson, Shelli, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 238  
 City Otis Orchards State WA Zip Code 99027-0238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 219.26

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A90FC7FAACBAD4709918**  
 Amount of Each Receipt this Period 23.08  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	288.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Powell, Carla, Patrice, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 Donegal Dr  
 City Smithville State MO Zip Code 64089-8383  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.60

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A821304714F4E47C1A8E**  
 Amount of Each Receipt this Period 96.20  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Powers, Rena, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44 Buckwheat Dr  
 City Fairport State NY Zip Code 14450-1129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A1D67A46256044F90876**  
 Amount of Each Receipt this Period 48.00  
 Memo Item  
 Payroll Deduction: \$12.00/Bi-Weekly

**C. Reynolds, William, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 S B St  
 City Saint Albans State WV Zip Code 25177-2735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AA818EFBEA74447D8951**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	264.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Ries, Lisa, Jo, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12364 Meadow Bluff Trl  
 City Afton State MN Zip Code 55001-9211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.56

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AC90A489367C440F5AB8**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Roberts, Rhett, Golden, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2345 Deer Pointe Dr  
 City Clarkston State WA Zip Code 99403-5001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AD35CCA9B1E7D42F5B6B**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Rosenthal, Daniel, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6700 Freeland Dr  
 City Hazelwood State MO Zip Code 63042-1266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AA4CE866A9D5448FA8C1**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 25
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Rouse, JOhn, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Winding Way  
 City Mt Juliet State TN Zip Code 37122-2047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) RVP, Billing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.84

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A9C104BF6D431445CA63**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Schulenberg, Dorothy, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3921 NE 79th Ter  
 City Kansas City State MO Zip Code 64119-4318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.44

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AEB725ED223FA443F92C**  
 Amount of Each Receipt this Period 23.08  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

**C. Scott, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1490 Skyline Dr  
 City Hermitage State PA Zip Code 16148-6742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A0D40586681A94E3B8B7**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	253.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Seager, Brett, J, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10538 S Culmination St

City South Jordan	State UT	Zip Code 84095-8315
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Manager, Division
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
384.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2020

**Transaction ID : A345FDCBADBDA499DA11**

Amount of Each Receipt this Period  
115.44

Memo Item  
Payroll Deduction: \$19.24/Bi-Weekly

**B. Stevens, Laura, Renee, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 Wildbrook Dr

City Biddeford	State ME	Zip Code 04005-9740
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Manager, Center
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2020

**Transaction ID : AF5E62A00B1A140D2BC5**

Amount of Each Receipt this Period  
115.44

Memo Item  
Payroll Deduction: \$19.24/Bi-Weekly

**C. Sweet, Mary, Bridget, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 Donnelly Cross Rd

City Spencer	State MA	Zip Code 01562-1501
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Manager, Region
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
384.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2020

**Transaction ID : A17F6D69A4B1646799C5**

Amount of Each Receipt this Period  
115.44

Memo Item  
Payroll Deduction: \$19.24/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	346.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Thompson, Stacy, Leigh, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 Englewood St  
 City Lansing State KS Zip Code 66043-1428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Chief Reimbursement Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AD1167CFDA894423BA0C**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Payroll Deduction: \$50.00/Bi-Weekly

**B. Tripp, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1906 Haven Bnd  
 City Tampa State FL Zip Code 33613-1107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A2214BC5D1F2641E7B76**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**C. Turman, James, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12332 County Road 2175  
 City Whitehouse State TX Zip Code 75791-6112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A05BD0FD7BB9D4810AD3**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	454.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 25
<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Willis, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 795 Wild Rd  
 City Monticello State GA Zip Code 31064-4023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.80

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A930476C3150A45FDAE8**  
 Amount of Each Receipt this Period 115.44  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Weekly

**B. Wilson, Tammy, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1240 Pinecrest Dr  
 City Rock Hill State SC Zip Code 29732-8061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2020  
**Transaction ID : AC59AECFA045844F2B96**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**C. Wojciak, David, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14103 Lonewood PI  
 City Tampa State FL Zip Code 33625-6411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of Communications  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 686.16

Date of Receipt 09 / 18 / 2020  
**Transaction ID : A5A9D88E410984F6FBC4**  
 Amount of Each Receipt this Period 240.00  
 Memo Item  
 Payroll Deduction: \$40.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	475.44
<b>TOTAL</b> This Period (last page this line number only).....	6693.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : B64192F6821</b>
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 5.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2020
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : BA49103432L</b>
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 5.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2020
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : BF6F3AB33/</b>
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 5.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. BILIRAKIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement Contribution to Committee

Candidate Name Bilirakis, Gus, M, ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: FL District: 12

Date of Disbursement: 09 / 29 / 2020

FEC Identification Number: C00408534  
Transaction ID : B34BD481D2  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. GRASSLEY COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
Mailing Address c/o 1020 North Fairfax St. Suite 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution to Committee

Candidate Name Grassley, Charles, E, ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)

State: IA District:

Date of Disbursement: 07 / 02 / 2020

FEC Identification Number: C00230482  
Transaction ID : BC4BF66064I  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3500.00