

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

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

FOR LINE NUMBER: PAGE 17 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

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

A. Swan, Edward J, , ,

Mailing Address 456 Choctaw Dr.

City
Abita Springs

State
LA

Zip Code
70420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amedisys, Inc.

Occupation (for Individual)
VP Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.8738

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll deduction - \$100 bi-weekly

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

B. Thompson, Regarner, , ,

Mailing Address 110 County Road 199

City
Oxford

State
MS

Zip Code
38655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amedisys Holding, LLC

Occupation (for Individual)
SVP Clinical Operations HSP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.8741

Amount of Each Receipt this Period

400.00

☐ Memo Item

Payroll deduction - \$100 bi-weekly

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

C. Trigilio, Michael, , ,

Mailing Address 14 Cedar Lane

City
Georgetown

State
MA

Zip Code
01833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amedisys, Inc.

Occupation (for Individual)
President Personal Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.8743

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Payroll deduction - \$750 bi-weekly

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

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

3600.00