

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

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

FOR LINE NUMBER: PAGE 42 OF 86  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Fresenius Medical Care North America PAC**

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

**A. Ketchersid, Terry, L, ,**

Mailing Address 141 Hooded Merganser Ct

City  
Johns Island

State  
SC

Zip Code  
29455-5739

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
SVP CMO Integrated Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4807.75

Date of Receipt

11 / 30 / 2019

**Transaction ID : A77832A524485439C934**

Amount of Each Receipt this Period

576.93

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

**B. Leinwand, Martin, , ,**

Mailing Address 85 Grove Street  
Unit #405

City  
Wellesley

State  
MA

Zip Code  
02482

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
SVP Bus Dev ICG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : A24ABEBE998CE4B248A6**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

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

**C. Thompson, David, Leslie, ,**

Mailing Address 3114 Dutch Forest Ln

City  
Edmond

State  
OK

Zip Code  
73013-7577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
VP Med Dir Critical Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : AA31964049C4346B5B41**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

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

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

1026.93