

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

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="2018"/>	<input type="text" value="18062.86"/>	<input type="text" value="18062.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38479.12"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4644.16"/>	<input type="text" value="29605.42"/>
(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="43123.28"/>	<input type="text" value="47668.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10.00"/>	<input type="text" value="4555.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43113.28"/>	<input type="text" value="43113.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND

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

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).....	3765.36	12845.26
(ii) Unitemized	878.80	16748.16
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4644.16	29593.42
(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)	4644.16	29593.42
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	12.00
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)).....▶	4644.16	29605.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4644.16	29605.42

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	10.00	55.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10.00	55.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4000.00
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	500.00
(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	500.00
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)) ..	10.00	4555.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10.00	4555.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4644.16	29593.42
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4644.16	29093.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10.00	55.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	12.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10.00	43.00

**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"/> 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	

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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A834814C06BAE4C989B9
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Boling, Edward, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4523 Dove Park Blvd
 City Louisville State KY Zip Code 40299-8343
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : ACA34C45873FF4561A3A
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. Burbach, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 Tanager Dr
 City State College State PA Zip Code 16803-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Div Reimbursement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2018
Transaction ID : A7F36EB36CBB34D0F845
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	163.12
TOTAL 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"/> 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. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A10A470FF789B4DE6AFF
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Capella, Pamela, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Windfall Ct
 City Cary State NC Zip Code 27518-9029
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A2A6CAE2AB59C4E5CB64
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. Cattron, Mark, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 Carley Ave
 City Sharon State PA Zip Code 16146-3723
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AFEC795D51CBD4D43943
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	200.08
TOTAL 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"/> 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. 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, Regional Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A46609C31C60C4E65BD9
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. DeBord, Charissa, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8957 Antigua Dr Apt 6105
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A9788C92F46504781857
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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 ▼ 423.28

Date of Receipt 11 / 16 / 2018
Transaction ID : A2ED38E4A979F4A6F94F
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	169.28
TOTAL 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"/> 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. Garcia, Andrea, Carolina, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5704 Lake Side Dr
 City Bossier City State LA Zip Code 71111-5508
 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 ▼ 230.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A3E31B9AC312945039AD
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction: \$10.00/Bi-Monthly

B. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A8560082190504109984
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C. Gilchrist, Sam, Edwards, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 Craford Pl
 City Portsmouth State VA Zip Code 23704-2405
 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 ▼ 207.72

Date of Receipt 11 / 16 / 2018
Transaction ID : A36354E6CD82942F990F
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶	163.12
TOTAL 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"/> 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. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AE7084C9144BC4313BCB
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Goodman, Jacalyn, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 W Pinehurst Dr
 City Bloomington State IN Zip Code 47403-3416
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : AFEDCDC95C674996855
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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, District
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : AE35528E5B57E4D22AB9
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	169.28
TOTAL 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. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A91DD60DD84B84484874
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Heaney, William, Raymond, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 Sidney Ave Apt A8
 City Port Orchard State WA Zip Code 98366-1903
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AA7287CDD438A4AC2AA1
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C. 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A16FF318431B64083B6D
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	233.92
TOTAL 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, 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, District
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A82696A1048294ABFAF4
 Amount of Each Receipt this Period 48.00
 Memo Item
 Payroll Deduction: \$12.00/Bi-Monthly

B. 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 ▼ 423.28

Date of Receipt 11 / 02 / 2018
Transaction ID : A2DAF37068B364A2C95D
 Amount of Each Receipt this Period 57.72
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C. Kelley, Marie, Elizabeth, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11894 Dynamite Ln
 City Kuna State ID Zip Code 83634-5019
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A831E90599BF14E16855
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶	151.88
TOTAL 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"/> 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. Larche, Tracy, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Club Rd
 Apt 105
 City Plattsburgh State NY Zip Code 12903-4030
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A6DC41B827D774FB2B2F
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. Layton, Darrell, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5220 Shasta Dr
 City Jonesboro State AR Zip Code 72404-8985
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A5B69E772E13E474890D
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A837A2A8378154CFAA4D
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	200.08
TOTAL 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"/> 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. 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 ▼ 346.32

Date of Receipt 11 / 16 / 2018
Transaction ID : ACC0CF268C8AF4367960
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Mathes, Jennifer, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 Bay Garden Ln
 City Knoxville State TN Zip Code 37938-4595
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A72D4945CE086400C985
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AAE9D2A6AEC064236832
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	200.08
TOTAL 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. 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, MGNED CAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A6E63390B4CF64EEC874
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

B. 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 ▼ 276.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A7C2E75184290437B8B5
 Amount of Each Receipt this Period 48.00
 Memo Item
 Payroll Deduction: \$12.00/Bi-Monthly

C. Meyer, Mitsi, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 Rayner Rd
 City Merigold State MS Zip Code 38759-9718
 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 ▼ 230.00

Date of Receipt 11 / 16 / 2018
Transaction ID : AC72E1EF3572E469F932
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction: \$10.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	168.00
TOTAL 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. Midgyett, Christopher, Wayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 E Armour Blvd
 Apt 102
 City Kansas City State MO Zip Code 64109-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A1BD49A16EB1C42A397A
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : AC2D454E007B246EDA4A
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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 ▼ 575.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A6C3EDF85F1EB4C0180F
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$25.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	192.32
TOTAL 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"/> 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. 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 ▼ 423.28

Date of Receipt 11 / 02 / 2018
Transaction ID : A056A4A3D8913488492A
 Amount of Each Receipt this Period 57.72
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Narramore, Crystal, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382
 City Mayking State KY Zip Code 41837-0382
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A929D07A597524A7BA67
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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 ▼ 575.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A2431085BACDB4A808C2
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$25.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	203.88
TOTAL 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"/> 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. 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A349014386DF040B2925
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : AB54BACB689834A1FA41
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

C. 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) Regional VP, Billing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AC3ED4A11FC504E73959
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	203.12
TOTAL 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 19 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. 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : ADF51377867494E58AF1
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. Qualls, Andrew, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 Edenbridge Dr
 City Windsor State CO Zip Code 80550-2858
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AB337E16FC91B4D7AB0E
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C. Rager, Mary, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2610 Lynn Ln
 City Casper State WY Zip Code 82609-2988
 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A4949E3864A3F4A39A2E
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	203.12
TOTAL 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. Reyes, Crystal, Nicole, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 N Nevada St
 City Yerington State NV Zip Code 89447-2326
 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 ▼ 880.00

Date of Receipt 11 / 02 / 2018
Transaction ID : A87093D995A0847E8963
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll Deduction: \$40.00/Bi-Monthly

B. 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A7C9799B1F1584BB4B73
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

C. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A64AB1AF876BC4B41808
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	276.96
TOTAL 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"/> 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. Roberts, Rhett, Golden, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 Ridgeview Dr
 City Clarkston State WA Zip Code 99403-3075
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A1C006E6201854769955
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

B. 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : AE34FC5B26198459689E
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

C. Schrimmel, John, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Stream View Ln
 City Lancaster State NY Zip Code 14086-3353
 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 ▼ 220.00

Date of Receipt 11 / 02 / 2018
Transaction ID : AEA88CF4971404337B69
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction: \$10.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	156.16
TOTAL 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"/> 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. 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
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A2E23AF5CD5A540028F4
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

B. Soldner, Daniel, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 Tail Feather Ln Apt B
 City Bozeman State MT Zip Code 59718-8640
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : AB8DC5BF5AA3954E609B3
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

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
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A6751B7CB98544F60A81
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	230.88
TOTAL 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. 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) VP, National Billing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A03F217F69EB54DDAACD
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$50.00/Bi-Monthly

B. Turman, James, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5985 FM 346 E
 City Tyler State TX Zip Code 75703-8129
 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 ▼ 265.42

Date of Receipt 11 / 16 / 2018
Transaction ID : A06DF4F23E4A4450FAB7
 Amount of Each Receipt this Period 46.16
 Memo Item
 Payroll Deduction: \$11.54/Bi-Monthly

C. 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A51A3BAEBE5854A21A38
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....	323.12
TOTAL 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 24 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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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. Wilson, Tammy, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1379
 City West Jefferson State NC Zip Code 28694-1379
 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 ▼ 460.00

Date of Receipt 11 / 16 / 2018
Transaction ID : A5ABC06688DD041EBA58
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Monthly

B. Woods, Russell, Everett, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8471 Highway 51 S
 City Hernando State MS Zip Code 38632-8645
 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 ▼ 442.52

Date of Receipt 11 / 16 / 2018
Transaction ID : A14A6CC4EFCF94CA19F2
 Amount of Each Receipt this Period 76.96
 Memo Item
 Payroll Deduction: \$19.24/Bi-Monthly

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	156.96
TOTAL This Period (last page this line number only).....	3765.36

**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) A. BB&T		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [] Transaction ID : BB8AA26A12 Amount of Each Disbursement this Period 5.00
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fees		Category/ Type []
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement MM / DD / YYYY 11 / 03 / 2018
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [] Transaction ID : B137967E31E Amount of Each Disbursement this Period 5.00
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fees		Category/ Type []
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10.00
TOTAL This Period (last page this line number only).....▶	10.00