

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

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

FOR LINE NUMBER: PAGE 2418 OF 2652

(check only one)

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

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NAME OF COMMITTEE (In Full)

**CHC BOLD PAC**

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

**A. Wright, Karen, , ,**

Mailing Address 5490 S Kenwood Dr

City  
Murray

State  
UT

Zip Code  
84107-6228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Turn Community Services

Occupation (for Individual)  
Program Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2017

**Transaction ID : VTEJXKW6129**

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

**B. Wright, Karen, , ,**

Mailing Address 5490 S Kenwood Dr

City  
Murray

State  
UT

Zip Code  
84107-6228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Turn Community Services

Occupation (for Individual)  
Program Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2017

**Transaction ID : VTEJXKZ48T4**

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

**C. Wright, Karen, , ,**

Mailing Address 5490 S Kenwood Dr

City  
Murray

State  
UT

Zip Code  
84107-6228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Turn Community Services

Occupation (for Individual)  
Program Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

492.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2017

**Transaction ID : VTEJXKZ48V2**

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

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

9.00