

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 6

(check only one)

<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)

NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC

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

A. Chamblin, Keith, , ,

Mailing Address 126 East Third Street

City
LexingtonState
KYZip Code
40508FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NTRAOccupation (for Individual)
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M	D D	Y Y Y Y
01	28	2020

Transaction ID : SA11AI.12786

Amount of Each Receipt this Period

104.17

☐ Memo Item
CONTRIBUTION

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

B. Waldrop, Alex, , ,Mailing Address 401 WEST MAIN ST
Suite 222City
LexingtonState
KYZip Code
40507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National T'bred Racing AsscnOccupation (for Individual)
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M	D D	Y Y Y Y
01	28	2020

Transaction ID : SA11AI.12785

Amount of Each Receipt this Period

104.17

☐ Memo Item
CONTRIBUTION

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

C.

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

M M	D D	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

208.34

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

208.34