

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

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

FOR LINE NUMBER: PAGE 20 OF 33

(check only one)

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

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NAME OF COMMITTEE (In Full)

ORTHOCAROLINA PA FEDERAL PAC

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

A. Mason, J. Bohannon, , ,

Mailing Address 159 Cherokee Road

City
Charlotte

State
NC

Zip Code
28207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OrthoCarolina, PA

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.8820

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. McBride, Robert, , Dr., Jr.

Mailing Address 4601 Park Road
Suite 250

City
Charlotte

State
NC

Zip Code
28209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OrthoCarolina, PA

Occupation (for Individual)
Orthopedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.8857

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. McDonald, James, P., ,

Mailing Address 122 Hickory Hill Road

City
Mooresville

State
NC

Zip Code
28117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OrthoCarolina

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.8822

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3000.00