

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

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

FOR LINE NUMBER: PAGE 39 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

**HCA INC. GOOD GOVERNMENT FUND**

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

**A. McNulty, Stephanie, , ,**

Mailing Address 6500 38th Avenue N

City

St. Petersburg

State

FL

Zip Code

33710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

St. Petersburg General Hosp

Occupation (for Individual)

COO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2017

**Transaction ID : SA11AI.35917**

Amount of Each Receipt this Period

500.00



Memo Item

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

**B. Melby, Gina, , ,**

Mailing Address 5301 S Congress Ave

City

Atlantis

State

FL

Zip Code

33462

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JFK Medical Center

Occupation (for Individual)

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.70

Date of Receipt

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

**Transaction ID : SA11AI.35654**

Amount of Each Receipt this Period

970.70



Memo Item

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

**C. Midgett, Ronnie, , ,**

Mailing Address 111 Earnie's Way

City

Summerville

State

SC

Zip Code

29483

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Capital Regional Med Ctr

Occupation (for Individual)

CFO

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

242.45

Date of Receipt

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

**Transaction ID : SA11AI.35837**

Amount of Each Receipt this Period

242.45



Memo Item

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

1713.15

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