

# **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)

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

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NAME OF COMMITTEE (In Full)

**THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC**

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

**A. Margulies, Mark, A., ,**

Mailing Address 3224 Huntington

City  
Weston

State  
FL

Zip Code  
33332-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Grant Thornton LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR66774322350**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

P/R Deduction (\$2000.00 Monthly)

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

**B. Melhuish, Ward, , ,**

Mailing Address 19681 Blue Ridge Mountain Road

City  
Bluemont

State  
VA

Zip Code  
20135-2045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Grant Thornton LLP

Occupation (for Individual)  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR66790722350**

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$500.00 Monthly)

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

**c. Meyer, David, C., ,**

Mailing Address 1725 Bison Meadow Lane

City  
Heath

State  
TX

Zip Code  
75032-5953

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Grant Thornton LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR66793922350**

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$500.00 Monthly)

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

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

3000.00