

**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)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
SUPERIOR AIR-GROUND AMBULANCE SERVICE INC EMPLOYEES PAC (SUPERIOR AMBULANCE EMPLOYEES P

A. Brown, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1227 E. Fifth Street

City Royal Oak	State MI	Zip Code 48067
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Superior Air Ground Ambulance	Occupation (for Individual) Executive Director
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 10 / 12 / 2018
Transaction ID : SA11AI.5230

Amount of Each Receipt this Period
 20.00

Memo Item contribution

B. Collins, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1810 Whispering Oaks Court

City Plainfield	State IL	Zip Code 60586
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Superior Ambulance	Occupation (for Individual) General Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 10 / 12 / 2018
Transaction ID : SA11AI.5234

Amount of Each Receipt this Period
 25.00

Memo Item contribution

C. Curtis, David L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1217 Triple Crown Court

City Bantlett	State IL	Zip Code 60103
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Superior Ambulance	Occupation (for Individual) Paramedic
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 2100.00

Date of Receipt
 10 / 12 / 2018
Transaction ID : SA11AI.5225

Amount of Each Receipt this Period
 100.00

Memo Item contribution

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	