

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

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

FOR LINE NUMBER: PAGE 6 OF 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**THMCarePAC**

Full Name (Last, First, Middle Initial)  
**A. Tammie Arnold**

Mailing Address 2565 Darden Christian Chapel Road

City State Zip Code  
Darden TN 38328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
THM Accountant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4768**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. Celeste Blocker**

Mailing Address 307 Beverly Avenue

City State Zip Code  
Hohenwald TN 38462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lewis County Nursing Administrator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4756**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. Blake Carrington**

Mailing Address 707 Cherokee Drive

City State Zip Code  
New Johnsonville TN 37134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Forest Cove Nursing Administrator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4763**

Amount of Each Receipt this Period  
360.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 960.00

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