

**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 8 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THMCarePAC

A. Tammy Faulkner
Full Name (Last, First, Middle Initial)

Mailing Address 325 Reeds Levee Road

City McKenzie State TN Zip Code 38261

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

Name of Employer THM Occupation RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.4771

Amount of Each Receipt this Period
 600.00

B. Michael Hammond
Full Name (Last, First, Middle Initial)

Mailing Address 815 Georgia Ave S

City Parsons State TN Zip Code 38363

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

Name of Employer THM Occupation IT

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.4772

Amount of Each Receipt this Period
 300.00

C. Lisa Hogan
Full Name (Last, First, Middle Initial)

Mailing Address 135 Betsy Drive

City Savannah State TN Zip Code 38372

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

Name of Employer Savannah Health Care Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
 420.00

SUBTOTAL of Receipts This Page (optional).....▶	1320.00
TOTAL This Period (last page this line number only).....▶	