

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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

Full Name (Last, First, Middle Initial) A. Lee Rooney		Date of Receipt
Mailing Address 3411 Shenandoah Lane		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
City	State	Zip Code
Cookeville	TN	38506
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4516
Bethesda Health Care Center	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	<input type="text" value="180.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Sherwood		Date of Receipt
Mailing Address 1416 Friar Tuck Drive		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
City	State	Zip Code
Union City	TN	38261
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4492
VanAyer Healthcare	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	<input type="text" value="120.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Smith		Date of Receipt
Mailing Address PO Box 458		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
City	State	Zip Code
Parsons	TN	38363
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4482
THM	CEO	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1800.00"/>	<input type="text" value="1000.00"/>
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>