

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

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

FOR LINE NUMBER: PAGE 92 OF 317

(check only one)

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

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Corporation Political Action Committee

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

A. Fahey, Thomas, Joseph, ,

Mailing Address 430 Lake Bluff Dr

City
Bluffton

State
SC

Zip Code
29910-9350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1001 Baxter Healthcare Corporation

Occupation (for Individual)
Region Mgr, Infusion System

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2019

Transaction ID : 2019092314496-180

Amount of Each Receipt this Period

13.28

☐ Memo Item

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

B. Fahey, Thomas, Joseph, ,

Mailing Address 430 Lake Bluff Dr

City
Bluffton

State
SC

Zip Code
29910-9350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1001 Baxter Healthcare Corporation

Occupation (for Individual)
Region Mgr, Infusion System

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2019

Transaction ID : 2019100813295-177

Amount of Each Receipt this Period

13.28

☐ Memo Item

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

C. Fahey, Thomas, Joseph, ,

Mailing Address 430 Lake Bluff Dr

City
Bluffton

State
SC

Zip Code
29910-9350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1001 Baxter Healthcare Corporation

Occupation (for Individual)
Region Mgr, Infusion System

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2019

Transaction ID : 2019102513455-177

Amount of Each Receipt this Period

13.28

☐ Memo Item

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

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

39.84