

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

ADDRESS (number and street) **19387 U.S. 19 NORTH**  
▼  
 Check if different than previously reported. (ACC) **Clearwater FL 33764-3102**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00653477** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2018 through  /  /  2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Clark, Christopher, Lynn, ,  
Type or Print Name of Treasurer

Signature of Treasurer *Clark, Christopher, Lynn, ,* [Electronically Filed] Date  /  /  2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		18062.86
(b) Cash on Hand at Beginning of Reporting Period.....	43113.28	
(c) Total Receipts (from Line 19) .....	3273.28	32878.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46386.56	50941.56
7. Total Disbursements (from Line 31).....	5.00	4560.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	46381.56	46381.56
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3207.98	16053.24
(ii) Unitemized .....	65.30	16813.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3273.28	32866.70
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3273.28	32866.70
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	12.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3273.28	32878.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3273.28	32878.70

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	5.00	60.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5.00	60.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	500.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5.00	4560.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5.00	4560.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3273.28	32866.70
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3273.28	32366.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5.00	60.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	12.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.00	48.00

**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 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Abbott, Brian, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18606 Ponciana Ave  
 City Cleveland State OH Zip Code 44135-3946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RHC Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A7AB0EE8A35114CE991F**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Anderson, Maxx, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43676 E Paul Lake Dr  
 City Perham State MN Zip Code 56573-8619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A73257B32E29D44F9B6D**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Artrip, Heather, Elaine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 191 Neal Dr  
 City Clintwood State VA Zip Code 24228-6968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A28615106D2F34D038C7**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	103.92
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Boling, Edward, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4523 Dove Park Blvd  
 City Louisville State KY Zip Code 40299-8343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AC032AF8914F34B28835**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**B. Burnsed, Sean, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12363 Eagle Chase Way  
 City New Port Richey State FL Zip Code 34655-0034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A351D13594A8D479AA92**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Butkevitch, Peter, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 725  
 City Gloversville State NY Zip Code 12078-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AB36CA7AE0AF84CAC95E**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.44
<b>TOTAL</b> This Period (last page this line number only).....	

**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 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. BUTLER, MITCHELL, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2325 Cougar Ave  
 City Cody State WY Zip Code 82414-5444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : ADA9C3DCF706E4790A0B**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Capella, Pamela, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Windfall Ct  
 City Cary State NC Zip Code 27518-9029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AA09955A0C0E949AFB0A**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**C. Cattron, Mark, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 529 Carley Ave  
 City Sharon State PA Zip Code 16146-3723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A40BF46E6CBE046BF832**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.44
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 9 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Chipps, Nicole, Patricia, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Ohio Ave  
 City Girard State OH Zip Code 44420-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AC29840FED11D428C870**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**B. Corley, Becky, Linn, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6835A Red Oak Dr # A  
 City Theodore State AL Zip Code 36582-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A35898763E69F4F03A91**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. DeBord, Charissa, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8957 Antigua Dr Apt 6105  
 City Seminole State FL Zip Code 33777-2141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A08BC46521B574168B86**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.34
<b>TOTAL</b> This Period (last page this line number only).....	

**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 10 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Ellis, Amy, D, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Current Ct

City Liberty	State MO	Zip Code 64068-8446
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Manager, Area
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2018

**Transaction ID : A51780B9100334CAB8FE**

Amount of Each Receipt this Period  
23.10

Memo Item  
Payroll Deduction: \$7.70/Bi-Monthly

**B. findley, julie, K, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 56th St

City Altoona	State PA	Zip Code 16601-1005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Director, Business Development
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2018

**Transaction ID : A00401778054E4312BFB**

Amount of Each Receipt this Period  
23.10

Memo Item  
Payroll Deduction: \$7.70/Bi-Monthly

**C. Gabriel, Annette, D, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 Amberglow PI

City Cary	State NC	Zip Code 27513-5347
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lincare	Occupation (for Individual) Manager, District
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
200.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2018

**Transaction ID : AC35C3FB4EA7F4A98990**

Amount of Each Receipt this Period  
23.10

Memo Item  
Payroll Deduction: \$7.70/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.30
<b>TOTAL</b> This Period (last page this line number only).....	

**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 11 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Gangemi, Deborah, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2970 Pleasant Ave  
 City Hamburg State NY Zip Code 14075-3624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) RVP, National Held Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A39A72700A7AA4790B2B**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Garcia, Andrea, Carolina, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5704 Lake Side Dr  
 City Bossier City State LA Zip Code 71111-5508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AF9A0F29DDE6E45D4BD8**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Deduction: \$10.00/Bi-Monthly

**C. Garner, William, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 W 58th St  
 City Casper State WY Zip Code 82601-6508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AF4C5216B82E54D4D940**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.44
<b>TOTAL</b> This Period (last page this line number only).....	

**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 12 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Garrett, Joel, Todd, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3337 N Quay Dr  
 City Columbus State GA Zip Code 31909-3614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A3E40E08DE49D4D0F83E**  
 Amount of Each Receipt this Period 24.00  
 Memo Item  
 Payroll Deduction: \$8.00/Bi-Monthly

**B. Gilchrist, Sam, Edwards, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 Craford Pl  
 City Portsmouth State VA Zip Code 23704-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 219.26

Date of Receipt 11 / 30 / 2018  
**Transaction ID : AA0F1BBC9967F463E89D**  
 Amount of Each Receipt this Period 11.54  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**C. Goldberg, Albert, O, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1202 Valley Rd  
 City Fruitland Park State FL Zip Code 34731-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RHC Services  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A43377D58956947FE894**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.26
<b>TOTAL</b> This Period (last page this line number only).....	

**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 13 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Goodman, Jacalyn, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1015 W Pinehurst Dr  
 City Bloomington State IN Zip Code 47403-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RHC Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2B33FB8EE54A45698EC**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**B. Gracey, Kenneth, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 Eighth Street  
 City Oneonta State NY Zip Code 13820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A8FF8BB6C9C1941C0A11**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Guiette, Jamie, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9529 Oakley Rd  
 City Saint Charles State MI Zip Code 48655-9527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2D3A9A56D909441F9D2**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.34
<b>TOTAL</b> This Period (last page this line number only).....	

**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 14 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Haak, Sharon, Denise, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5157 71st St N  
 City Saint Petersburg State FL Zip Code 33709-2624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A09708BE603DD45CFA91**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Hagner, Glenda, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3453  
 City Camdenton State MO Zip Code 65020-3453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A521C6E0BCCB84969A3B**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Heaney, William, Raymond, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2250 Sidney Ave Apt A8  
 City Port Orchard State WA Zip Code 98366-1903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AF9A1D4FE151A45708AA**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	138.54
<b>TOTAL</b> This Period (last page this line number only).....	

**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 15 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Jackson, Bridgette, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 Pine St  
 City Lathrop State MO Zip Code 64465-9755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) NATL Director, O2 Support Svs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A141A6E52426F46079C1**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Jarvis, Dawn, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8499 14th St N  
 City St Petersburg State FL Zip Code 33702-7956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A666931B1085E4E4F97C**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

**C. Jones, Brian, Edmund, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 179 Escoll Dr  
 City East Stroudsburg State PA Zip Code 18301-9364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A997C355EAF8043A3A8F**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Deduction: \$12.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	119.10
<b>TOTAL</b> This Period (last page this line number only).....	

**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 16 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Jones, Jennifer, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 246 Wilmington Ave  
 City Tonawanda State NY Zip Code 14150-8726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A0B7F152606F2495894B**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Jones, Jodi, Beth, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 Da Vinci Dr  
 City Nokomis State FL Zip Code 34275-4222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Director, National Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A5437099B3AE24606B93**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Kelley, Marie, Elizabeth, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11894 Dynamite Ln  
 City Kuna State ID Zip Code 83634-5019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : ABE1933A41F844F6C9DC**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.44
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 17 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Kelley, Mark, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5619 N Elm St  
 City Spokane State WA Zip Code 99205-6853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2D34EAE4E7B0420FA95**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Kielb, Frank, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 68 W 4th St  
 City Oswego State NY Zip Code 13126-1525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AAC47CE5C267E46AB988**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Larche, Tracy, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 67 Club Rd Apt 105  
 City Plattsburgh State NY Zip Code 12903-4030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AEDAE2726C644401081B**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 18 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Law, Melissa, Kaye, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 382 Old Dam Ln  
 City Greenup State KY Zip Code 41144-8024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A02021F8703C94C799B7**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Layton, Roger, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5220 Shasta Dr  
 City Jonesboro State AR Zip Code 72404-8985  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2F9633C7EC284233965**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Lewis, Hayley, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 64  
 City Salina State UT Zip Code 84654-0064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A7B427CD563504EDB914**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	138.54
<b>TOTAL</b> This Period (last page this line number only).....	

**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 19 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Lizotte, Dennis, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Wildbrook Dr  
 City Biddeford State ME Zip Code 04005-9740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 404.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AE90F57065E33430A828**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Mathes, Jennifer, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8311 Bay Garden Ln  
 City Knoxville State TN Zip Code 37938-4595  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A5DDAB38C637B436A8E9**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**C. McBride, Doug, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 Coleman Rd  
 City Springfield State SD Zip Code 57062-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A995C8848FD314A1F85D**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.06
<b>TOTAL</b> This Period (last page this line number only).....	

**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 20 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. McGonagill, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1825 Sutherland Dr W  
 City Palm Harbor State FL Zip Code 34683-3452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) National Director, MGNED CAR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2B3B153B7D7A46828AA**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

**B. McKenzie, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 Glenroy Ct  
 City Flat Rock State NC Zip Code 28731-9561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Director, Hospital Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A9A66DB4D261E4F05857**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Deduction: \$12.00/Bi-Monthly

**C. Meyer, Mitsi, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 951 Rayner Rd  
 City Merigold State MS Zip Code 38759-9718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AB1468B6D632A455B81E**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Deduction: \$10.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	126.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 21 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Midgyett, Christopher, Wayne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 801 E Armour Blvd  
 Apt 102  
 City Kansas City State MO Zip Code 64109-2347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A7889034623784206A62**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**B. Mohammed, Shiraz, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17306 Ladera Estates Blvd  
 City Lutz State FL Zip Code 33548-4816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Head of HR and Payroll  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A03B0D180DFB24464876**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**C. Monroe, Donald, A, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4923 Cedarhurst Rd  
 City Toledo State OH Zip Code 43613-3028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A5162838150894B5687E**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	144.24
<b>TOTAL</b> This Period (last page this line number only).....	

**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 22 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Moore, Jon, Matthew, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5501 Lee Ave  
 City Little Rock State AR Zip Code 72205-3439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A7ADEF61D1D0745A2B97**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Moore, Joni, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20414 N Felspar Rd  
 City Deer Park State WA Zip Code 99006-9761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A9788F35DC53749DBB90**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Moore, Monica, Joy, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address HC 66, Box 1-F  
 City Frankford State WV Zip Code 24938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A79E97701CB4047CA9AA**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.30
<b>TOTAL</b> This Period (last page this line number only).....	

**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 23 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Narramore, Crystal, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 382  
 City Mayking State KY Zip Code 41837-0382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A4F85432B79684F3994C**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**B. Newbeck, Patrick, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6105 Royal Birkdale Dr  
 City Lake Worth State FL Zip Code 33463-6525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A254EEF8CB8044C8DBDD**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Payroll Deduction: \$25.00/Bi-Monthly

**C. Patterson, Marcus, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Plantation Dr  
 City Mayflower State AR Zip Code 72106-8419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AE5EA9261E59746A39B7**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	144.24
<b>TOTAL</b> This Period (last page this line number only).....	

**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 24 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Payne, Mary, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4215 Alderwood Ln  
 City Charlotte State NC Zip Code 28215-9508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Region  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AEBC07FF169984653880**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

**B. Perry, Kellie, Rosser, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 Rosser Rd  
 City Covington State GA Zip Code 30016-4178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) RVP, Billing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2CDCA1FBFBA046A3B50**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Peterson, Shelli, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 238  
 City Otis Orchards State WA Zip Code 99027-0238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A969A76C48B94497D87E**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	152.34
<b>TOTAL</b> This Period (last page this line number only).....	



**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 25 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Qualls, Andrew, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 Edenbridge Dr  
 City Windsor State CO Zip Code 80550-2858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A5AF9B633A945484CB65**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Rager, Mary, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2610 Lynn Ln  
 City Casper State WY Zip Code 82609-2988  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A7654B2F7362B4E68AB1**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

**C. Reynolds, William, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 S B St  
 City Saint Albans State WV Zip Code 25177-2735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A899AACCC3D2AF4A3EA93**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	177.72
<b>TOTAL</b> This Period (last page this line number only).....	

**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 26 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Ries, Lisa, Jo, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12364 Meadow Bluff Trl  
 City Afton State MN Zip Code 55001-9211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A82E0339B4CA240E9B0A**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Roberts, Rhett, Golden, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3054 Clemans Rd  
 City Clarkston State WA Zip Code 99403-9716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A52027AF95DB141B882D**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

**C. Rosenthal, Daniel, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6700 Freeland Dr  
 City Hazelwood State MO Zip Code 63042-1266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A0BD822B2DEB347F88E8**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	152.34
<b>TOTAL</b> This Period (last page this line number only).....	

**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 27 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Schulenberg, Dorothy, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3921 NE 79th Ter  
 City Kansas City State MO Zip Code 64119-4318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A1C58DABA897247AC962**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Seager, Brett, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10538 S Culmination St  
 City South Jordan State UT Zip Code 84095-8315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A37A9D94FF4694BB9836**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Soldano, Kendale, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Coachman Dr S  
 City Freehold State NJ Zip Code 07728-3122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A5A66CB3636994AB6A34**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	103.92
<b>TOTAL</b> This Period (last page this line number only).....	

**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 28 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Soldner, Daniel, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 Tail Feather Ln  
 Apt B  
 City Bozeman State MT Zip Code 59718-8640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AA8149389F4E24A208AE**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**B. Sweet, Mary, Bridget, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Donnelly Cross Rd  
 City Spencer State MA Zip Code 01562-1501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A77DC724E850E4018963**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Thompson, Stacy, Leigh, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 Englewood St  
 City Lansing State KS Zip Code 66043-1428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) VP, National Billing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A6A2ABAA255554E5EA40**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$50.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	265.44
<b>TOTAL</b> This Period (last page this line number only).....	

**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 29 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Tomasiak, Boguslaw, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1587 Sand Hollow Ln  
 City Palm Harbor State FL Zip Code 34683-4839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Application Developer 2  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A6B6F71F660CA4DB7AAA**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Tournay, Rebecca, Christine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15309 333rd Ave  
 City Hull State IL Zip Code 62343-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Center  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A9DF54E9D435048909BD**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**C. Turman, James, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 202 Amanda Ct  
 City Whitehouse State TX Zip Code 75791-3847  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AF3EF60D113B445D29F5**  
 Amount of Each Receipt this Period 34.62  
 Memo Item  
 Payroll Deduction: \$11.54/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.82
<b>TOTAL</b> This Period (last page this line number only).....	

**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 30 OF 32
	<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)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. White, Maureen, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 Tampa Dr  
 City Buffalo State NY Zip Code 14220-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, RBCO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AE9791671BD92466D8F7**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Willis, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 795 Wild Rd  
 City Monticello State GA Zip Code 31064-4023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Regional Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt 12 / 28 / 2018  
**Transaction ID : A2C86BEEC67FA4192894**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C. Wilson, Tammy, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1379  
 City West Jefferson State NC Zip Code 28694-1379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Area  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018  
**Transaction ID : AD16EDE247FCB4BA08A3**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 32
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

**A. Wissler, Michael, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 Pinehurst Rd  
 City Berlin State MD Zip Code 21811-1620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, District  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2018  
**Transaction ID : AE78497B1410343EEAA8**  
 Amount of Each Receipt this Period 23.10  
 Memo Item  
 Payroll Deduction: \$7.70/Bi-Monthly

**B. Woods, Russell, Everett, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8471 Highway 51 S  
 City Hernando State MS Zip Code 38632-8645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincare Occupation (for Individual) Manager, Region  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2018  
**Transaction ID : AE57E1C63906740F58D4**  
 Amount of Each Receipt this Period 57.72  
 Memo Item  
 Payroll Deduction: \$19.24/Bi-Monthly

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.82
<b>TOTAL</b> This Period (last page this line number only).....	3207.98

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2018
Mailing Address 1099 New York Ave NW Ste 100		FEC Identification Number C [ ] <b>Transaction ID : B7550AE9D0</b>
City Washington	State DC	Zip Code 20001-4452
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 5.00
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ]
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ]
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5.00