

# **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)

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HINES, J.C., , DR.,**

Mailing Address 12590 CHARLOTTE DR.

City  
 ALPHARETTA

State  
 GA

Zip Code  
 30004-1054

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 ALPHARETTA ANIMAL HOSPITAL

Occupation (for Individual)  
 VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**07 / 05 / 2019**

**Transaction ID : SA11A.1732655**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOFFMAN, LYNN, , ,**

Mailing Address 101 SHADY LANE

City  
 CARLISLE

State  
 PA

Zip Code  
 17013-1636

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF EMPLOYED

Occupation (for Individual)  
 SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**07 / 24 / 2019**

**Transaction ID : SA11A.1734405**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HOFFMAN, LYNN, , ,**

Mailing Address 101 SHADY LANE

City  
 CARLISLE

State  
 PA

Zip Code  
 17013-1636

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF EMPLOYED

Occupation (for Individual)  
 SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**07 / 31 / 2019**

**Transaction ID : SA11A.1734535**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

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

225.00