

# **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)

**Group 1 Automotive Inc. PAC**

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

**A. Sullivan, Michael, , ,**

Mailing Address 4811 Shore Hills Dr.

City  
Kingwood

State  
TX

Zip Code  
77345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORPORATE OFFICE

Occupation (for Individual)  
Manufacturer Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR152906748402**

Amount of Each Receipt this Period

55.00

☐ Memo Item

P/R Deduction (\$27.50 Semi-Monthly)

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

**B. Fesmire, Charles, , ,**

Mailing Address 431 Prestwick Court

City  
Houston

State  
TX

Zip Code  
77057

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORPORATE OFFICE

Occupation (for Individual)  
Administration CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR79024148402**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Semi-Monthly)

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

**C. Reeve, Michelle, , ,**

Mailing Address 3006 St. Emanuel Street

City  
Houston

State  
TX

Zip Code  
77004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORPORATE OFFICE

Occupation (for Individual)  
Finance Corp Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR79026348402**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Semi-Monthly)

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

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

255.00