FEC FORM 3X	RE Al	EPORT O ND DISB Other Than An	JRSEME	NTS	Offic	e Use Only
1. NAME OF COMMITTEE (in fi		PE OR PRINT ▼	Example over the	: If typing, type lines.	12FE4M5	
	DINGS, IN			JND 		
ADDRESS (number and	street)	9387 U.S. 19 NORTH	1			
Check if differ	rent					
than previous reported. (AC					FL 33	3764-3102
2. FEC IDENTIFICA	TION NUMB	er 🔻	CITY ▲		STATE 🔺	ZIP CODE
C C00653477			3. IS THIS REPORT	× NEW (N) OR	AMENDI (A)	ED
 4. TYPE OF REPO (Choose One) (a) Quarterly Repo April 15 	orts:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)		 (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
July 15 Quarterly Cotober 1 Quarterly January 3	Report (Q3)	(C) 12-Day PRE -Electio Report for t	n he: Con	ary (12P) vention (12C)	General (12G) Special (12S)	in the State of
July 31 N	lid-Year lon-election () (MY)	(d) 30-Day POST -Elect Report for t		eral (30G)	Runoff (30R)	Special (30S)
(TER)	·	E	Election on	M / D D /	Y Y Y Y Y	in the State of
5. Covering Period	0 7		022 th	rough	/ D D / Y 30	2022
I certify that I have exactly that I have exactly the or Print Name of	(eport and to the be CLARK, CHRISTOPH		ge and belief it is tr	rue, correct and com	plete.
Signature of Treasurer	CLARK, C	CHRISTOPHER, LYNN,	, [Elec	tronically Filed]	Date	D D / Y Y Y Y 11 2022
NOTE: Submission of fa	lse, erroneous	, or incomplete infor	mation may subject	the person signing	this Report to the per	nalties of 52 U.S.C. § 3010
Office Use Only					FI	EC FORM 3X Rev. 05/2016

10/12/2022 15 : 07

PAGE 1 / 21

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND

R	eport Covering the Period: From: 07	M / D D / Y Y Y Y Y 01 2022 T	o: 09 / 30 / 2022
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		120866.51
	(b) Cash on Hand at Beginning of Reporting Period	117238.62	
	(c) Total Receipts (from Line 19)	6883.27	20255.38
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	124121.89	141121.89
7.	Total Disbursements (from Line 31)	2500.00	19500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	121621.89	121621.89
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	5000.07	
(i) Itemized (use Schedule A)	5036.07	7850.06
(ii) Unitemized	1847.20	12405.32
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	6883.27	20255.38
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	6883.27	20255.38
Totals to Line 33, page 5)▶ 2. Transfers From Affiliated/Other	0003.27	
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	, , ,	
to Federal Candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	
(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
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	6883.27	20255.38
20 Total Enderal Descinta		
0. Total Federal Receipts	6883.27	20255.38

(subtract Line 18(c) from Line 19).....▶

- Carlos	-7-	1 mar	- Carlor 1997	-7-		- Carlos		
					- 20	125	5.38	
		_	_				0.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 19500.00 and Other Political Committees... 2500.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 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 Total Federal Election Activity (add (C) 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)).. 2500.00 19500.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 2500.00 19500.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC	Form	3X	(Rev	05/2016)
I LO	1 01111	JA	(1100.	03/2010)

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

							6883.27
		7			7		
1.00							1
		-			-		0.00
1.00	1	1.1	1			1	1
		-7			7		6883.27
1.00							
		-7			-7		0.00
100							1
		-7-			-7-		0.00
							0.00
	1	_7_	1	-	_7_	-	

20255.38 0.00 20255.38 0.00 0.00 0.00 0.00

Page 5

COLUMN B Calendar Year-to-Date

Cale

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 21 (check only one)				
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committe					
Full Name of Individual (Last, First, Middle Ir A. ABBOTT, BRIAN, D., , Mailing Address 18606 PONCIANA AVE City CLEVELAND FEC ID number of contributing federal political committee. Name of Employer (for Individual) LINCARE Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code OH 44135-3946 C Occupation (for Individual) MANAGER, RHC SERVICES Aggregate Year-to-Date ▼ 384.80	Date of Receipt				
Full Name of Individual (Last, First, Middle In B. ADAMS, PAULA, K, , Mailing Address 1208 CLAYS TRL City OLDSMAR FEC ID number of contributing federal political committee. Name of Employer (for Individual) LINCARE Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code FL 34677-4840 C Occupation (for Individual) HEAD OF EMPLOYEE RELATIONS Aggregate Year-to-Date ▼ 500.00	Date of Receipt Date of Receipt 09 2022 Transaction ID : AFAA4263B38044F4E9E8 Amount of Each Receipt this Period 175.00 Memo Item PAYROLL DEDUCTION: \$25.00/BI-WEEKLY				
Full Name of Individual (Last, First, Middle Ir ADUA, RICHARD, WILLIAM, , Mailing Address 396 OPENING HILL RD City MADISON FEC ID number of contributing federal political committee. Name of Employer (for Individual) LINCARE Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code CT 06443-1944 C Occupation (for Individual) DIRECTOR, MANAGED CARE SALI Aggregate Year-to-Date ▼ 230.80	Date of Receipt 09 30 2022 Transaction ID : A85007E8C4E09416BAC7 Amount of Each Receipt this Period Amount of Each Receipt this Period Memo Item PAYROLL DEDUCTION: \$11.54/BI-WEEKLY				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1 ¹						
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)	/IPLOYEE	ACTION FUND							
Full Name of Individual (Last, First, Middle In DEBORD, CHARISSA, ANNE, ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8957 ANTIGUA DR			09 30 / Y Y Y Y 2022						
City SEMINOLE	State FL	Zip Code 33777-2141	Transaction ID : A6CAE5AD4E4D240F8E Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		34.62						
Name of Employer (for Individual)		upation (for Individual) NAGER, REGIONAL REIMBURS	Memo Item ME PAYROLL DEDUCTION: \$11.54/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.80							
Full Name of Individual (Last, First, Middle In B. DEMELLO, LORI, B, ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2912 HAMPTON PLACE CT			09 30 / Y Y Y Y 2022						
City PLANT CITY	State FL	Zip Code 33566-9321	Transaction ID : A51DCAE970B7246C49C Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		210.00						
Name of Employer (for Individual) LINCARE		upation (for Individual) LEARNING AND DEVELOPMEN	Memo Item T PAYROLL DEDUCTION: \$30.00/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00							
Full Name of Individual (Last, First, Middle In C. GANGEMI, DEBORAH, A, ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2970 PLEASANT AVE			09 30 2022						
City HAMBURG	State NY	Zip Code 14075-3624	Transaction ID : A91780875BDAE42D49 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		140.00						
Name of Employer (for Individual) LINCARE		upation (for Individual) , NATIONAL HELD SALES	Memo Item PAYROLL DEDUCTION: \$20.00/BI-WEEKLY						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00							
SUBTOTAL of Receipts This Page (optional)			384.62						
TOTAL This Period (last page this line number	only)								

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SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EMPLOYEE	E ACTION FUND	
LINCARE MA	Drganization Name Zip Code 82601-6508 upation (for Individual) NAGER, DIVISION Year-to-Date ▼	Date of Receipt 09 / 30 / 2022 Transaction ID : A0E6786E00100474B9C9 Amount of Each Receipt this Period 134.68 Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY
Ull Name of Individual (Last, First, Middle Initial) or Full C	384.80	
B. GUIETTE, JAMIE, L, , Mailing Address 9529 OAKLEY RD City State SAINT CHARLES MI FEC ID number of contributing C federal political committee. C Name of Employer (for Individual) Occ LINCARE MA Perceipt For: Aggregate Other (specify) ▼ Image: C	Zip Code 48655-9527	Date of Receipt
Full Name of Individual (Last, First, Middle Initial) or Full C Display="block">JOHNSON, SUSAN, M, , Mailing Address 8061 124TH TER City State	Drganization Name	Date of Receipt 09 30 2022 Transaction ID : ABD9E43CAF78542D08DC
LARGO FL FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occ LINCARE RVF	33773-2923 upation (for Individual) P, BILLING Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 140.00 Memo Item PAYROLL DEDUCTION: \$20.00/BI-WEEKLY
SUBTOTAL of Receipts This Page (optional)		309.30

Use separate schedule(s)

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PAGE

9 OF

			Use separate schedule(s)	(check	(check only one)					
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	× 1 ¹	1a 3	11b	11c		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for	the p	urpose	of soliciti	ng cor	ntributi	ons
	NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EM	PLOYEE	ACTION FUND							
Α.		ial) or Full O	rganization Name	Dat	e of	Receipt				
	Mailing Address 3 BIRCH TREE CT		09 ^M		30 /)22	Y		
	City EAST STROUDSBURG	State PA	Zip Code 18301-1337				D: A79A6 Receipt			02599D
	FEC ID number of contributing federal political committee.	С			_	-7			48.0	0
	Name of Employer (for Individual)		upation (for Individual) NAGER, AREA	PAY		no Item . DEDU	n CTION: \$ ^r	12.00/	BI-WE	EKLY
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00]						
в.	Full Name of Individual (Last, First, Middle Init JONES, JODI, BETH, ,	ial) or Full O	rganization Name	Dat	e of	Receipt				
	Mailing Address 6371 ENGLISH CREEK DR	Zip Code		м 09		D / 30	Y Y 202	ү 22	Y	
	City LAKELAND	State FL	33811-1876				Contempt Contempt			DC484A
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period					
	Name of Employer (for Individual) LINCARE		upation (for Individual) ECTOR, NATIONAL MARKETIN	G PAY	- ·	no Item	n CTION: \$′	19.24/1	BI-WE	EKLY
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]						
с.	Full Name of Individual (Last, First, Middle Initi LARCHE, TRACY, MARIE, ,	ial) or Full O	rganization Name	Dat	e of	Receipt				
	Mailing Address 5513 61ST LN E	1			09 ^M	3	30	20	1. A. A.	
	City BRADENTON	State FL	Zip Code 34203-9759				D : A5A71 Receipt			18069CA
	FEC ID number of contributing federal political committee.			_	y			34.6	2	
	Name of Employer (for Individual) LINCARE		upation (for Individual) D OF TRAINING	PAY		no Item DEDU	ו CTION: \$	11.54/	BI-WE	EKLY
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.80								
⊢	UBTOTAL of Receipts This Page (optional)					5		-	217.3	0

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SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	an using the name and a									
	INC. EMPLOYEE	ACTION FUND								
Full Name of Individual (Last, First LEWIS, HAYLEY, L, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address PO BOX 64			M M / D D / Y Y Y Y 09 02 2022							
City SALINA	State UT	Zip Code 84654-0064	Transaction ID : A9D3543B293AF4A9F9C3 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		19.24							
Name of Employer (for Individual)		upation (for Individual) NAGER, AREA	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.36	1							
			1							
Full Name of Individual (Last, First LIZOTTE, DENNIS, P, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9 WILDBROOK			09 / 0 / Y Y Y Y Y 2022							
City BIDDEFORD	State ME	Zip Code 04005-9740	Transaction ID : A659E8D13E34D43BE8B7 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		134.68							
Name of Employer (for Individual LINCARE		upation (for Individual) NAGER, AREA	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 384.80]							
Full Name of Individual (Last, First C. MATHES, JENNIFER, A	· ,	rganization Name	Date of Receipt							
Mailing Address 2346 EPPIE CO	· · · · · · · · · · · · · · · · · · ·		09 30 Y Y Y Y Y 2022							
City KNOXVILLE	State TN	Zip Code 37931-4021	Transaction ID : A0EC97E2979BD4C03991 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		34.62							
Name of Employer (for Individual) LINCARE		upation (for Individual) IAGER, REGION	Memo Item PAYROLL DEDUCTION: \$11.54/BI-WEEKLY							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.80]							
SUBTOTAL of Receipts This Page	(optional)		188.54							
TOTAL This Period (last page this										

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PAGE 11 OF

IT.			Use separate schedule(s		(check only one)							
11	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12	<u> </u>		
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements ma	ay not be sold or used by a	any perso mittee to	n for the	purp purp	14 Dose of utions fi	15 soliciting	contribut	ions		
	NAME OF COMMITTEE (In Full)		duress of any political com					UIII SUCI	Commu			
	LINCARE HOLDINGS, INC. EN	IPLOYEE	ACTION FUND									
Α.	Full Name of Individual (Last, First, Middle Init MCBRIDE, DOUG, S, ,	tial) or Full O	organization Name		Date of Receipt							
	Mailing Address 115 COLEMAN RD		09 30 / Y Y Y Y 2022									
	City SPRINGFIELD	State SD	Zip Code 57062-6419	-					8234D114 is Period	468FA2C		
	FEC ID number of contributing federal political committee.	С					,	1 - gr.	134.6	8		
	Name of Employer (for Individual)		upation (for Individual) NAGER, AREA				Item EDUCT	ION: \$19	.24/BI-WE	EKLY		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80									
в.	Full Name of Individual (Last, First, Middle Ini MCGONAGILL, CATHERINE, , ,	tial) or Full O	Organization Name		Date of	f Red	ceipt					
	Mailing Address 1825 SUTHERLAND DR W			м м 09	1	D D D 30	/ Y	y y 2022	Y			
	City PALM HARBOR	State Zip Code FL 34683-3452							87D6A54	6DCA47		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) LINCARE		upation (for Individual) TIONAL DIRECTOR, MGNE	D CAR	Memo Item PAYROLL DEDUCTION: \$20.00/BI-WE							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00									
с.	Full Name of Individual (Last, First, Middle Ini MCKENZIE, MICHAEL, M, ,	tial) or Full O	organization Name		Date of	f Red	ceipt					
	Mailing Address 6221 S BLUFF RIDGE RD				м м 09	/	D D 30	/ Y	2022	Y		
	OZARK	State MO	Zip Code 65721-6673						4E78E554 is Period	709A17		
	FEC ID number of contributing federal political committee.	С					, .	, ,	134.7	75		
	Name of Employer (for Individual) LINCARE	Occu DIRI	IONS			Item EDUCT	ION: \$19).25/BI-WI	EEKLY			
	Receipt For: Primary General Other (specify)	Aggregate										
s	UBTOTAL of Receipts This Page (optional)			····· Þ			, . ,	,	409.4	3		
Т	OTAL This Period (last page this line number	only)		►				-				

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. E	MPLOYEE	ACTION FUND							
Full Name of Individual (Last, First, Middle A. MOHAMMED, SHIRAZ, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 17306 LADERA ESTATES	BLVD		09 30 2022						
City LUTZ	State FL	Zip Code 33548-4816	Transaction ID : A3FF44EDA8C7B473B Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		134.68						
Name of Employer (for Individual) LINCARE		upation (for Individual) AD OF HR AND PAYROLL	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKL						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80	1						
Full Name of Individual (Last, First, Middle B. MOREAU, SANDRA, L, ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 16226 MUIRFIELD DR	1		M M / D D / Y Y Y Y Y 09 30 2022						
City ODESSA	State FL	Zip Code 33556-5431	Transaction ID : A19A66E45D06A4F81B42 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		134.68						
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, NHC SERVICES	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]						
Full Name of Individual (Last, First, Middle C. NEWBECK, PATRICK, E, ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6105 ROYAL BIRKDALE D	R		M M / D D / Y Y Y Y Y 09 30 2022						
City LAKE WORTH	State FL	Zip Code 33463-6525	Transaction ID : A378C9B3544C14E7A						
FEC ID number of contributing federal political committee.	С		175.00						
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, AREA	Memo Item PAYROLL DEDUCTION: \$25.00/BI-WEEKL						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	1						
SUBTOTAL of Receipts This Page (optional).			444.36						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 1 person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC.												
Full Name of Individual (Last, First, Middle A. PAYNE, MARY, J, ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 157 ROSEWOOD DR N			09 30 2022									
City LAKE PLACID	State FL	Zip Code 33852-3817	Transaction ID : AC5CC874FEDEE4C68 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		140.00									
Name of Employer (for Individual)		upation (for Individual) NAGER, REGION	Memo Item PAYROLL DEDUCTION: \$20.00/BI-WEEKLY									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00]									
Full Name of Individual (Last, First, Middle PEDERSEN, JENNIFER, L, ,		rganization Name	Date of Receipt									
Mailing Address 18412 KEYSTONE MANC	R RD	Zip Code	09 / D D / Y Y Y Y 2022									
ODESSA	FL	33556-4836	Transaction ID : AC173D98C2C4C4D8Ca Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		175.00									
Name of Employer (for Individual) LINCARE		upation (for Individual) IEF COMPLIANCE OFFICER	Memo Item PAYROLL DEDUCTION: \$25.00/BI-WEEKLY									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]									
Full Name of Individual (Last, First, Middle C. PERRY, KELLIE, ROSSER, ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 65 ROSSER RD			09 / D D / Y Y Y Y 09 30 2022									
City COVINGTON	State GA	Zip Code 30016-4178	Transaction ID : A4231CAA289D349D6A Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		134.68									
Name of Employer (for Individual) LINCARE		upation (for Individual) VACY OFFICER	PAYROLL DEDUCTION: \$19.24/BI-WEEKLY									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.80]									
SUBTOTAL of Receipts This Page (optional)		449.68									
TOTAL This Period (last page this line num	per only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

IT.	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page				(check only one)						
								11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be ddress of	sold or used by any pe any political committee	erson to s	13 for the olicit co	pur ntrib	pose of	soliciting	g con	tributi	ons	
	NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EM	PLOYEE	E ACTI	ON FUND									
Α.	Full Name of Individual (Last, First, Middle Initi PETERSON, SHELLI, M, ,	al) or Full O	rganizatio	n Name		Date of Receipt							
	Mailing Address PO BOX 238					м м 09	/	30) / Y	y 203	22 22	Y	
	City OTIS ORCHARDS	State WA		Code 027-0238				-	A4D845 Receipt th		-	A1297F	
	FEC ID number of contributing federal political committee.	С				<u> </u>					34.6	2	
	Name of Employer (for Individual)		•	or Individual) REGIONAL REIMBURSM	1E I			D Item DEDUCT	-ION: \$1 [,]	1.54/E	3I-WE	EKLY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-D	230.80									
в.	Full Name of Individual (Last, First, Middle Initi POWELL, CARLA, PATRICE, ,	al) or Full O	rganizatio	on Name		Date o	f Re	eceipt					
	Mailing Address 401 DONEGAL DR					м м 09	/	30	/ Y	202	22	Y	
	City SMITHVILLE	StateZip CodeMO64089-8383					Transaction ID : A9548B79A5CCE4E1B8C9 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C				134.68							
	Name of Employer (for Individual) LINCARE	Occupation (for Individual) MANAGER, AUDIT				Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.80											
с.	Full Name of Individual (Last, First, Middle Initi POWERS, RENA, , ,	al) or Full O	rganizatio	on Name		Date o	f Re	eceipt					
	Mailing Address 1664 KENYON RD					M M 09	/	30		202	22	Y	
	City ONTARIO	State NY	·	Code 19-8868					ACFC98 leceipt th			69EB41	
	FEC ID number of contributing federal political committee.	С				<u> </u>		y	, ,		48.0	0	
	Name of Employer (for Individual)		upation (f NAGER, A	or Individual) REA				o Item DEDUCT	TION: \$1	2.00/E	3I-WE	EKLY	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-D	ate ▼ 240.00									
⊢	UBTOTAL of Receipts This Page (optional)				-		-	y .	, , ,		217.30	0	

Use separate schedule(s)

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PAGE 15 OF

IT.	ITEMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)									
			for each category of the Detailed Summary Page		4 11a		11b 14	11c	12	_	717			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any p address of any political committe	person	13 for the olicit cor	purp	ose of	15 soliciting rom such	16 contrib n comm	ution ittee.	17 IS			
	NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EM	PLOYEE	E ACTION FUND											
Α.	Full Name of Individual (Last, First, Middle Initi REYNOLDS, WILLIAM, P, ,	al) or Full O	Organization Name		Date of	Re	ceipt							
	Mailing Address 909 S B ST				09 02 2022									
	City SAINT ALBANS	State WV	Zip Code 25177-2735		Transaction ID : A7CFBEDE237864EE99B Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		80	0.00				
	Name of Employer (for Individual)		upation (for Individual) NAGER, AREA	F			ltem EDUCT	ION: \$20).00/BI-V	VEEI	ΚLY			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00]										
в.	Full Name of Individual (Last, First, Middle Initi RIES, LISA, JO, ,	al) or Full O	Organization Name		Date of	Re	ceipt							
	Mailing Address 12364 MEADOW BLUFF TRL					09 / D / Y Y Y 2022								
	City AFTON	State Zip Code MN 55001-9211				Transaction ID : AD66D839865AE4532A8F Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							4.68					
	Name of Employer (for Individual) LINCARE	Occi MAI	F	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 384.80]										
с.	Full Name of Individual (Last, First, Middle Initi ROBERTS, RHETT, GOLDEN, ,	al) or Full O	Organization Name		Date of	Re	ceipt							
	Mailing Address 2345 DEER POINTE DR				^M 09	/	D D 30	/ Y	y y 2022	Y				
	City CLARKSTON	State WA	Zip Code 99403-5001				-	A479373 eceipt th			•B11			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. <u>,</u>	34	4.62				
	Name of Employer (for Individual) LINCARE Receipt For:	Occupation (for Individual) MANAGER, AREA					Item EDUCT	ION: \$11	.54/BI-V	NEEI	KLY			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.80											
s	UBTOTAL of Receipts This Page (optional)			•			y	,	249	9.30				
т	OTAL This Period (last page this line number o	only)					-			-				

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SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

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	Use separate schedule(s)	(check only one)										
ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC	. EMPLOYEE	ACTION FUND										
Full Name of Individual (Last, First, Mic ROUSE, JOHN, D, ,	Idle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 75 WINDING WAY			09 30 2022									
City MT JULIET	State TN	Zip Code 37122-2047	Transaction ID : A36BAAB7A4B0A45358F0 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		134.68									
Name of Employer (for Individual) LINCARE		upation (for Individual) P, BILLING	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]									
Full Name of Individual (Last, First, Mic SCHULENBERG, DOROTHY,		rganization Name	Date of Receipt									
Mailing Address 3921 NE 79TH TER			M M M / D D / 2022 Transaction ID : AA88139224D7A4533BCB Amount of Each Receipt this Period									
City KANSAS CITY	State MO	Zip Code 64119-4318										
FEC ID number of contributing federal political committee.	С		34.62									
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, DIVISION	Memo Item PAYROLL DEDUCTION: \$11.54/BI-WEEKLY									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.80]									
Full Name of Individual (Last, First, Mic SCOTT, ROBERT, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1490 SKYLINE DR			09 / D D / Y Y Y Y 09 30 2022									
City HERMITAGE	State PA	Zip Code 16148-6742	Transaction ID : A61BF9255FF9848AEB62 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		134.68									
Name of Employer (for Individual) LINCARE		upation (for Individual) IAGER, AREA	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.80]									
SUBTOTAL of Receipts This Page (option	nal)		303.98									
TOTAL This Period (last page this line nu	umber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the	(check only one)						
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Rep or for commercial purposes, other tha	oorts and Statements mann using the name and a	I ay not be sold or used by any p uddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, I	NC. EMPLOYEE	ACTION FUND							
Full Name of Individual (Last, First) SEAGER, BRETT, J, ,	Middle Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 10538 S CULMINA	TION ST		09 30 2022						
City SOUTH JORDAN	State UT	Zip Code 84095-8315	Transaction ID : AC45DEB1D872740189FE Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		134.68						
Name of Employer (for Individual)		upation (for Individual) NAGER, AREA	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]						
Full Name of Individual (Last, First B. STEVENS, LAURA, RENE		organization Name	Date of Receipt						
Mailing Address 9 WILDBROOK DR			09 30 2022						
City BIDDEFORD	State ME	Zip Code 04005-9740	Transaction ID : ACB9868C8E6364EFFB9E Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		134.68						
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, CENTER	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]						
Full Name of Individual (Last, First C. SWEET, MARY, BRIDGE		organization Name	Date of Receipt						
Mailing Address 21 DONNELLY CF	ROSS RD		09 30 / Y Y Y Y Y 2022						
City SPENCER	State MA	Zip Code 01562-1501	Transaction ID : A8896C6C0332D4772BD6 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		134.68						
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, REGION	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.80	1						
SUBTOTAL of Receipts This Page (optional)		404.04						
TOTAL This Period (last page this lir	ne number only)								

Use separate schedule(s)

FOR LINE NUMBER:

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TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. E									
Full Name of Individual (Last, First, Middle A. SYRBE, ROBERT, PAUL, ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7 TRAFALGAR CT			M M / D D / Y Y Y Y 09 30 2022						
City COLUMBIA	State SC	Zip Code 29209-1947	Transaction ID : AD1AE0A84697848E993 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		34.62						
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, SALES	Memo Item PAYROLL DEDUCTION: \$11.54/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.80]						
Full Name of Individual (Last, First, Middle B. THOMPSON, STACY, LEIGH, ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 817 ENGLEWOOD ST			M M / D D / Y Y Y Y 09 30 2022						
City LANSING	State KS	Zip Code 66043-1428	Transaction ID : A1E0CF88F7FFF488B81B Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		350.00						
Name of Employer (for Individual) LINCARE		upation (for Individual) IEF REIMBURSEMENT OFFICE	Memo Item R PAYROLL DEDUCTION: \$50.00/BI-WEEKLY						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]						
Full Name of Individual (Last, First, Middle C. TRIPP, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1906 HAVEN BND			M M / D D / Y Y Y Y 09 30 2022						
City TAMPA	State FL	Zip Code 33613-1107	Transaction ID : AC8637DBCF84147C0A4 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		140.00						
Name of Employer (for Individual) LINCARE		upation (for Individual) NERAL COUNSEL	PAYROLL DEDUCTION: \$20.00/BI-WEEKLY						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]						
SUBTOTAL of Receipts This Page (optional).			524.62						
TOTAL This Period (last page this line number	er only)								

Image# 202210129532152631

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 19 OF

	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. E	MPLOYEE	ACTION FUND								
Full Name of Individual (Last, First, Middle TURMAN, JAMES, K, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11654 FM 2868			09 30 2022							
City FLINT	State TX	Zip Code 75762-9491	Transaction ID : AF504251CBBE8486BBE Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.62							
Name of Employer (for Individual) LINCARE		ipation (for Individual) IAGER, AREA	Memo Item PAYROLL DEDUCTION: \$11.54/BI-WEEKLY							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.80]							
Full Name of Individual (Last, First, Middle WILLIS, LARRY, , , Mailing Address 795 WILD RD	Initial) or Full O	rganization Name	Date of Receipt							
City	State	Zip Code	09 30 2022 Transaction ID : AF22C2C7308C14431A26							
MONTICELLO	GA	31064-4023	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		134.68							
Name of Employer (for Individual) LINCARE		upation (for Individual) NAGER, REGIONAL REIMBURS	Memo Item PAYROLL DEDUCTION: \$19.24/BI-WEEKLY							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.80]							
Full Name of Individual (Last, First, Middle WILSON, TAMMY, S, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1240 PINECREST DR			M M / D D / Y Y Y Y 09 30 2022							
City ROCK HILL	State SC	Zip Code 29732-8061	Transaction ID : A6EFB1669A18F4A5A93 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		140.00							
Name of Employer (for Individual) LINCARE		upation (for Individual) IAGER, AREA	Memo Item PAYROLL DEDUCTION: \$20.00/BI-WEEKLY							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]							
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line numb			309.30							

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check d	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	۹ _	11b	11c 15	12	17		
Any information copied from such Reports and or for commercial purposes, other than using	I Statements mathematic name	l ay not be sold or used by any p ddress of any political committe	erson for th	ne pur contri	rpose of	soliciting	contribu	utions		
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. E	MPLOYEE	ACTION FUND								
Full Name of Individual (Last, First, Middle WOJCIAK, DAVID, E, ,	Initial) or Full O	rganization Name	Date	of R	eceipt					
Mailing Address 14103 LONEWOOD PL			0		30 D	/ Y	ү ү 2022	Y		
City TAMPA	State FL	Zip Code 33625-6411				A48DA4 eceipt th		34C2AA60		
FEC ID number of contributing federal political committee.	С						280	.00		
Name of Employer (for Individual)					o Item DEDUCT	'ION: \$40).00/BI-W	/EEKLY		
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 800.00]								
Full Name of Individual (Last, First, Middle B.	Initial) or Full O	rganization Name	Date	of R	eceipt					
Mailing Address			M			/ Y	Y Y	Y		
City	State	Zip Code	Amo	unt of	Each R	eceipt th	is Period	k		
FEC ID number of contributing federal political committee.										
Name of Employer (for Individual)	Occ	upation (for Individual)		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]							
Full Name of Individual (Last, First, Middle C.	Initial) or Full O	rganization Name	Date	of B	eceipt					
Mailing Address						/ Y	Y Y	Y		
City	State	Zip Code	Amo	unt of	Each R	eceipt th	is Period			
FEC ID number of contributing federal political committee.					y .	9				
Name of Employer (for Individual)	Occi	upation (for Individual)		Mem	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V]							
SUBTOTAL of Receipts This Page (optional).					,	,	280	.00		
TOTAL This Period (last page this line number	er only)						5036	.07		

SCHEDULE B (FEC Form 3X)		arate schedule(s)			NUMBER: PAGE 21 OF 21					
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(ch	eck only 21b 28a	v one) 22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the nat										
NAME OF COMMITTEE (IN Full)			ID							
Full Name (Last, First, Middle Initial) A. PALLONE FOR CONGRESS Mailing Address DO BOX 2176					Date of Disbursement					
Mailing Address PO BOX 3176	Stata	Zin Codo								
City LONG BRANCH Purpose of Disbursement	State NJ	Zip Code 07740-3176			FEC Identification Number					
CONTRIBUTION TO COMMITTEE					C C00226928 Transaction ID : BE14F1F9972					
PALLONE, FRANK, , , JR			Cate Ty	gory/ pe	Amount of Each Disbursement this Period					
Senate President	ement For: 2 Primary Other (spec	X General			2500.00 Memo Item					
State: NJ District: 06 Full Name (Last, First, Middle Initial) B.					Date of Disbursement					
Mailing Address										
City	State	Zip Code			FEC Identification Number					
Purpose of Disbursement					C					
Candidate Name			Cate Ty		Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General								
State: District:					Memo Item					
Full Name (Last, First, Middle Initial)					Date of Disbursement					
Mailing Address										
City	State	Zip Code			FEC Identification Number					
Purpose of Disbursement					С					
Candidate Name			Cate Ty	gory/ pe	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General cify) ▼								
State: District:	a									
SUBTOTAL of Disbursements This Page (optional).				····· ▶	2500.00					
TOTAL This Period (last page this line number only	/)			🕨	2500.00					