

**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 39
	<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	

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)  
**Select Medical Corporation PAC**

**A. Mr. Dionisio Bencomo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2851 SW 137 Court  
 City Miami State FL Zip Code 33175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Select Medical Corporation Occupation Administrator (Ex)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.36

Date of Receipt 07 / 15 / 2016  
**Transaction ID : A2016-1360581**  
 Amount of Each Receipt this Period 19.24  
 Memo Item

**B. Mr. Joedy L Berkstresser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4714 Gettysburg Road  
 City Mechanicsburg State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Select Medical Corporation Occupation Vice President, Information Systems  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1077.02

Date of Receipt 07 / 15 / 2016  
**Transaction ID : A2016-1360657**  
 Amount of Each Receipt this Period 76.93  
 Memo Item

**C. Ms. Kelly L Blake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3269 Blue Goose Road  
 City Nicktown State PA Zip Code 15762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Select Medical Corporation Occupation Administrator (Ex)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.36

Date of Receipt 07 / 15 / 2016  
**Transaction ID : A2016-1360582**  
 Amount of Each Receipt this Period 19.24  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.41  
**TOTAL** This Period (last page this line number only)..... ▶