

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

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

FOR LINE NUMBER: PAGE 21 OF 335

(check only one)

☒ 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. **BARTENSCHLAG, JACK, , ,**

Mailing Address 1301 MATTHIAS DR

City
 COLUMBUS

State
 OH

Zip Code
 43224-2040

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 02 / 2019

Transaction ID : SA11A.1740935

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

B. **BASS, CHRISTOPHER, , ,**

Mailing Address 411 WALNUT STREET
 9147

City
 GREEN COVE SPRINGS

State
 FL

Zip Code
 32043-3443

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 ATLANTIC HEALTHCARE CONSULTING LLC

Occupation (for Individual)
 HEALTHCARE CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 05 / 2019

Transaction ID : SA11A.1747883

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

C. **BASS, JIM, , ,**

Mailing Address 3733 HULEN PARK DR.

City
 FORT WORTH

State
 TX

Zip Code
 76109-3310

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 30 / 2019

Transaction ID : SA11A.1750687

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

150.00

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