

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

RICK SCOTT FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
MARSHALL, JOHN, F., MR.,

Mailing Address 136 MOORINGS PARK DRIVE APT. P502

City NAPLES	State FL	Zip Code 34105-2995
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FEC ID number of contributing federal political committee. **C**

Name of Employer N.A.	Occupation RETIRED
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Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2018

Transaction ID : SA11A.30726

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARSHALL, KENNETH, , MR.,

Mailing Address 3498 IMPERATA DR.

City VIERA	State FL	Zip Code 32955-6089
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FEC ID number of contributing federal political committee. **C**

Name of Employer GLOVER OIL COMPANY INC.	Occupation OWNER & VP
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11A.33939

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARSH, ROBERT, , MR.,

Mailing Address 3016 WINDING SHORE

City PFLUGERVILLE	State TX	Zip Code 78660-7874
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FEC ID number of contributing federal political committee. **C**

Name of Employer ACADIA HEALTHCARE	Occupation EXECUTIVE
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Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2018

Transaction ID : SA11A.33911

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2300.00
