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Image# 202204119496021826

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	or Other Than An Au	thorized Committee	ee	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	ng, type	12FE4M5	
LINCARE HOLDINGS,	INC. EMPLOYEE	ACTION FUND			1
ADDRESS (number and street)	19387 U.S. 19 NORTH				
Check if different than previously reported. (ACC)	Clearwater			FL 333	764-3102
2. FEC IDENTIFICATION NU	<b>MBER</b> ▼C	ITY 🛦		STATE <b></b>	ZIP CODE ▲
C C00653477			NEW (N) <b>OR</b>	AMENDE (A)	ED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On:		May 20 (M5) Jun 20 (M6)	Aug 20 (Ms	Year Only)
April 15 Quarterly Report (Q1  July 15 Quarterly Report (Q2  October 15	(c) 12-Day	Primary (12F		Oct 20 (M1 General (12G) Special (12S)	10) Jan 31 (YE)  Runoff (12R)
Quarterly Report (Q3  January 31  Year-End Report (YE	Float	ion on	D   D   /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (300	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Elect	ion on	D D /	Y   Y   Y   Y	in the State of
5. Covering Period 01	01 / 2022	through	03		2022
I certify that I have examined this Type or Print Name of Treasurer	Clark, Christopher, Lynn, ,	of my knowledge and I	belief it is tru	ue, correct and comp	plete.
Signature of Treasurer Clark,	Christopher, Lynn, ,	[Electronicall	y Filed] [	Date 04	09 / 2022
NOTE: Submission of false, errone	ous, or incomplete informati	on may subject the per	son signing tl	his Report to the pen	alties of 52 U.S.C. § 3010
Office Use				FE	EC FORM 3X Rev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

#### LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND

01 2022 03 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 120866.51 January 1. 2022 (b) Cash on Hand at 120866.51 Beginning of Reporting Period..... 6252.22 6252.22 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 127118.73 127118.73 6(a) and 6(c) for Column B)..... 7500.00 7500.00 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 119618.73 119618.73 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

R	eport Covering the Period: From:	/ 01 / 2022 To	io: 03 / 31 / 2022
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees		
	(i) Itemized (use Schedule A)	140.00	140.00
	(ii) Unitemized(iii) TOTAL (add	6112.22	6112.22
	Lines 11(a)(i) and (ii)	6252.22	6252.22
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
12	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	6252.22	6252.22
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
47	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.00	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
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	6252.22	6252.22
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	6252.22	6252.22

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Salsinaa 1941 to Salt		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating		0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	7500.00	7500.00		
Independent Expenditures	200	0.00		
(use Schedule E)	0.00	0.00		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including		0.00		
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity (from Schedule H6)	20))			
(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		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7500.00	7500.00		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	7500.00	7500.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6252.22	6252.22		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6252.22	6252.22		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00		

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

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

FOR LINE NUMBER:				PAGE	:	6	OF	8		
	(check only one)									
		X	11a	11b		11c		12		
			13	14		15		16	6	17

	the name and address of any political committee			
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. E	EMPLOYEE ACTION FUND			
Full Name of Individual (Last, First, Middle Thompson, Stacy, Leigh, ,  Mailing Address 817 Englewood St	Initial) or Full Organization Name	Date of Receipt		
City Lansing  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Lincare  Receipt For:  □ Primary □ General □ Other (specify) ▼	State KS Zip Code 66043-1428  C  Occupation (for Individual) Chief Reimbursement Officer  Aggregate Year-to-Date ▼  300.00	Transaction ID: A4B6F10B6F8084BE48D0  Amount of Each Receipt this Period  100.00  Memo Item  Payroll Deduction: \$50.00/Bi-Weekly		
Full Name of Individual (Last, First, Middle  Wojciak, David, E, ,  Mailing Address 14103 Lonewood PI  City Tampa  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Lincare  Receipt For:  Primary General Other (specify) ▼	State Zip Code FL 33625-6411  C  Occupation (for Individual) Head of Communications  Aggregate Year-to-Date ▼  240.00	Date of Receipt  03 18 2022  Transaction ID: AA5BC9AE6FCD04CE087  Amount of Each Receipt this Period  40.00  Memo Item  Payroll Deduction: \$40.00/Bi-Weekly		
Full Name of Individual (Last, First, Middle  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)	Initial) or Full Organization Name  State Zip Code  C Occupation (for Individual)  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  Memo Item		
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	140.00		
TOTAL This Period (last page this line numb	er only)	140.00		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 8 (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Crieck only one)				
		d by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EMPL	OYEE ACTION FUN	ID				
Full Name (Last, First, Middle Initial)  A. CATHY MCMORRIS RODGERS F	OR CONGRESS	Date of Disbursement				
Mailing Address 410 1st Street SE, Ste. 310		03 03 2022				
Washington	State         Zip Code           DC         20003-1866	FEC Identification Number				
Purpose of Disbursement Contribution to Committee Candidate Name		C C00390476  Transaction ID : BBD6A2D810				
Cathy, Mcmorris, Rodgers, ,	agent Fore 2000	Category/ Type  Amount of Each Disbursement this Period 2500.00				
Senate President	nent For: 2022  Primary General  Other (specify)	Memo Item				
State: WA District: 05  Full Name (Last, First, Middle Initial)  B. CRAPO VICTORY COMMITTEE  Mailing Address 5263 Pocosin Lane	Date of Disbursement  02 17 2022					
c/o Barracks Row Strategies	c/o Barracks Row Strategies					
•	VA 22304-8675	FEC Identification Number  C C00649574				
Candidate Name CRAPO VICTORY COMMITTEE	,	Category/ Type  Transaction ID : B96825B698E  Amount of Each Disbursement this Period				
Senate	nent For: 2022 Primary General Other (specify) Other	2500.00 Memo Item				
Full Name (Last, First, Middle Initial)  C. Guthrie for Congress	Date of Disbursement					
Mailing Address 5827 Colfax Avenue		02 10 2022				
Alexandria	State Zip Code VA 22311-1013	FEC Identification Number				
Purpose of Disbursement Contribution to Committee  Candidate Name Guthrie, Brett, , ,		Category/ Type  Constant Const				
Senate x	nent For: 2022 Primary General Other (specify)	1000.00  Memo Item				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)						

#### S П

SCHEDULE B (FEC Form 3X)		=0=	FOR LINE NUMBER: PAGE 8 OF 8			
ITEMIZED DISBURSEMENTS	I llee concrete cohedule(s)		LINE NUMBER: PAGE 8 OF 8 only one)			
II EIVIIZED DISBURSEIVIEN IS	for each category of the	e l` 🖂 21h	22 🗶 23 🗌 26 📗 27			
	Detailed Summary Pag	e 28a	28b 28c 29 30b			
Any information copied from such Reports and Stater						
or for commercial purposes, other than using the nan	ne and address of any po	ilitical committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) LINCARE HOLDINGS, INC. EMPL	OVEE ACTION E	LIND				
LINGARE HOLDINGS, INC. EMPL	OILL ACTION F	שאט				
Full Name (Last, First, Middle Initial)			Date of Disbursement			
A. WENSTRUP FOR CONGRESS	WENSTRUP FOR CONGRESS					
Mailing Address 1006 Pendleton St			03 28 2022			
Mailing Address 1000 Femaleton of			20 2022			
*	State Zip Code		FEC Identification Number			
Alexandria Purpose of Disbursement	VA 22314-1837	7				
Contribution to Committee			C C00497818			
Candidate Name		Category/	Transaction ID : B2587A41C2 <sup>-</sup> Amount of Each Disbursement this Period			
Wenstrup, Brad, , ,		Type				
	ment For: 2022	•	1500.00			
Senate x	Primary General	I				
State: OH District: 02	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
В.			Date of Disbursement			
			M = M / D = D / Y = Y = Y			
Mailing Address	Mailing Address					
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement			C			
Candidate Name		Catagory	Amount of Each Disbursement this Period			
		Category/ Type				
Office Sought: House Disburser	ment For:					
Senate	Primary General	I				
President State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
C.			Date of Disbursement			
-			M = M / D = D / Y = Y = Y			
Mailing Address						
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement	Down of Disharana					
Purpose of Disbursement	C					
Candidate Name	Amount of Each Disbursement this Period					
	Amount of Each Disputsonicht this Fortout					
Senate   President	Primary General	I				
State: District:	Other (specify) ▼		Memo Item			
Side.						
SUBTOTAL of Disbursements This Page (optional)			1500.00			
			7500.00			
TOTAL This Period (last page this line number only)	)		7500.00			