SCHEDULE A (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:					PAGE		7	OF	- :	25
	(check only one)										
	×	11a		11b		11c		12			
		13		14		15		16			17

ITEMIZED RECEIPTS 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) THMCarePAC Full Name (Last, First, Middle Initial) Nancy Cathey Date of Receipt Mailing Address 720 Franklin Ave 31 2013 12 City State Zip Code Transaction ID: SA11AI.4855 TN 38351 Lexington Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Total contribution for reporting period. Name of Employer Occupation Westwood Health Care RN Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David Davis Date of Receipt Mailing Address 184 Fisher Drive 2013 12 31 City State Zip Code Transaction ID: SA11AI.4860 TN 38363 **Parsons** Amount of Each Receipt this Period FEC ID number of contributing C 1800.00 federal political committee. Total contribution for reporting period. Name of Employer Occupation THM COO Receipt For: Aggregate Year-to-Date ▼ Primary General 3600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Demaree Date of Receipt Mailing Address 52 West 8th Street 2013 12 31 City State Zip Code Transaction ID: SA11AI.4861 TN **Parsons** 38363 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Total contribution for reporting period.

SUBTOTAL of Receipts This Page (optional)		Ξ	7	Ξ		7	2340	0.00	
TOTAL This Period (last page this line number only)		Ξ	7		_	7			

600.00

Occupation

Aggregate Year-to-Date ▼

Attorney

Name of Employer

Primary

Other (specify)

General

THM

Receipt For: