

**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 17 OF 191
	<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	<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. Bein, Robert, J, Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 Mud College Road

City Littlestown	State PA	Zip Code 17340
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
615.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2018

**Transaction ID : A2018-839945**

Amount of Each Receipt this Period  
76.93

Memo Item

**B. Bein, Robert, J, Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 Mud College Road

City Littlestown	State PA	Zip Code 17340
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
692.37

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2018

**Transaction ID : A2018-905096**

Amount of Each Receipt this Period  
76.93

Memo Item

**C. Bein, Robert, J, Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 Mud College Road

City Littlestown	State PA	Zip Code 17340
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
769.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2018

**Transaction ID : A2018-1072345**

Amount of Each Receipt this Period  
76.93

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.79
<b>TOTAL</b> This Period (last page this line number only).....▶	