

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

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

FOR LINE NUMBER: PAGE 51 OF 62

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Bloomin' Brands, Inc. Political Action Committee

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

A. SHEIN, DAVID, , ,

Mailing Address 7 JONES AVE

City
DEPTFORD

State
NJ

Zip Code
08096-3733

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : A69BC3C2E890F4CD6BF8

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. SABOFF, KATHLEEN, , ,

Mailing Address 4205 BEAR GULLY ROAD

City
WINTER PARK

State
FL

Zip Code
32792-9373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
MANAGING PARTNER

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
03 / 22 / 2019

Transaction ID : A6E403372148C4838850

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CROWDER, JOHN, , ,

Mailing Address 4431 AUTUMN RIVER RD. E

City
JACKSONVILLE

State
FL

Zip Code
32224-7596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
MANAGING PARTNER

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
03 / 22 / 2019

Transaction ID : A7FFE52CB887E4FF38DD

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

140.00

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