

# 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 19 OF 116

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

**Bloomin' Brands, Inc. Political Action Committee**

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

**A. READ, WILLIAM, , ,**

Mailing Address 178 KOLLINOVA DRIVE

City  
CLAYTON

State  
NC

Zip Code  
27527-4272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Field OSRS

Occupation (for Individual)

Joint Venture Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2020

Transaction ID : AAEB0CFBD3A764845A6A

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. LAM, DEAN, , ,**

Mailing Address 7121 SUNNYHILL DR.

City

MECHANICSVILLE

State

VA

Zip Code

23111-3442

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2020

Transaction ID : A005637DA0A7C48FAB63

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. CARTER, KENNETH, , ,**

Mailing Address 1805 17TH AVE. SW

City

VERO BEACH

State

FL

Zip Code

32962-6874

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2020

Transaction ID : A3AFAD5C45EBC485DAEF

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

105.00