

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)

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

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NAME OF COMMITTEE (In Full)

LIFECARE HOLDINGS LLC POLITICAL ACTION COMMITTEE (LIFECARE PAC)

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

A. Battafarano, Frank, , ,

Mailing Address 5740 Martin Road
#3320

City
Plano

State
TX

Zip Code
75024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LifeCare Management Services

Occupation (for Individual)
President and Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2018

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Cronin, Mike, , ,

Mailing Address 7540 Mason Dells Drive

City
Dallas

State
TX

Zip Code
75230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LifeCare Management Services

Occupation (for Individual)
VP, Reimbursement & Government Aff.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2018

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. Murray, James, , ,

Mailing Address 11 Brownsboro Hill

City
Louisville

State
KY

Zip Code
40207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LifeCare Management Services

Occupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 04 / 2018

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3000.00

3000.00