

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

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

FOR LINE NUMBER: PAGE 6 OF 10

(check only one)

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

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NAME OF COMMITTEE (In Full)

TEXAS ASSOCIATION FOR HOME CARE & HOSPICE, INC. TEXAS HOME CARE & HOSPICE PAC- FEDERAL

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

A. Baker, Paul, , Mr.,

Mailing Address 609 Kendall Parkway

City

Boerne

State

TX

Zip Code

78015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Disability Service of the SW

Occupation (for Individual)

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

Transaction ID : SA11AI.9113

Amount of Each Receipt this Period

1750.00

☐ Memo Item
Contribution

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

B. Cargle, Ken, , Mr.,

Mailing Address 4001 Oakhurst

City

Amarillo

State

TX

Zip Code

79109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Goodcare Health Services

Occupation (for Individual)

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2017

Transaction ID : SA11AI.9107

Amount of Each Receipt this Period

80.00

☐ Memo Item
Contribution

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

C. Hammon, Rachel, , Ms.,

Mailing Address 3737 Executive Center Drive

City

Austin

State

TX

Zip Code

78731

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Texas Assn Homecare & Hospice

Occupation (for Individual)

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

Transaction ID : SA11AI.9115

Amount of Each Receipt this Period

63.00

☐ Memo Item
(\$63.00 biweekly) payroll deduction

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

1893.00

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