

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

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

FOR LINE NUMBER: PAGE 19 OF 44

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

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

A. Mills, Allen, P, ,

Mailing Address 550 S Caldwell St  
Ste 920

City  
Charlotte

State  
NC

Zip Code  
28202-2633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
FMS General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2019

Transaction ID : AAED9E438A67448C8B22

Amount of Each Receipt this Period

208.00

☐ Memo Item

Payroll Deduction: \$104.00/Bi-Weekly

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

B. Ketchersid, Terry, L, ,

Mailing Address 2751 N Main St

City

South Boston

State

VA

Zip Code

24592-5223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
SVP CMO Integrated Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2019

Transaction ID : AB48930EC29A4486894F

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

C. Correia, Randell, Joseph, ,

Mailing Address 129 Delta Blvd  
Apt 9401

City

Franklin

State

TN

Zip Code

37067-5762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresenius Medical Care NA

Occupation (for Individual)  
Pres Pharmacy

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  
02 / 23 / 2019

Transaction ID : A4F4951FE8A0A43AAB3F

Amount of Each Receipt this Period

160.00

☐ Memo Item

Payroll Deduction: \$80.00/Bi-Weekly

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

752.62

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