

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)  
**SUPERIOR AIR-GROUND AMBULANCE SERVICE INC EMPLOYEES PAC (SUPERIOR AMBULANCE EMPLOYEES P**

**A. David L. Curtis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1217 Triple Crown Court  
 City Bantlett State IL Zip Code 60103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Superior Ambulance Occupation Paramedic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.4671**  
 Amount of Each Receipt this Period 100.00  
 Memo Item contribution

**B. David L. Curtis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1217 Triple Crown Court  
 City Bantlett State IL Zip Code 60103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Superior Ambulance Occupation Paramedic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 24 / 2016  
**Transaction ID : SA11AI.4675**  
 Amount of Each Receipt this Period 100.00  
 Memo Item contribution

**C. Mary Franco**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 395 W. Lake Street  
 City Elmhurst State IL Zip Code 60126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Superior Ambulance Occupation VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1144.00

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.4672**  
 Amount of Each Receipt this Period 104.00  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	304.00
<b>TOTAL</b> This Period (last page this line number only).....	