

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

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

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)

<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)
THMCarePAC

Full Name (Last, First, Middle Initial)
A. Joesph Strawn

Mailing Address 80 Dodd Street

City Lexington	State TN	Zip Code 38351
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FEC ID number of contributing federal political committee. **C**

Name of Employer THM	Occupation Project Director
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period
300.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
B. Anne Vise

Mailing Address 23 Riverbend CV

City Bath Springs	State TN	Zip Code 38311
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FEC ID number of contributing federal political committee. **C**

Name of Employer THM	Occupation Accountant
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period
1200.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	5760.00