

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 17

(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"/> 17			

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NAME OF COMMITTEE (In Full)

Renaissance Health Service Corporation Political Action Committee

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

A. Eklund, Stephen, A., ,

Mailing Address 1609 Brooklyn Ave.

City
Ann ArborState
MIZip Code
48104-4420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	26	2017

Transaction ID : 23974791

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Comar, Terence, R., , D.D.S.,M.S

Mailing Address 10704 Sudan

City
PortageState
MIZip Code
49002-7369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Terence R. Comar DDS, MSOccupation (for Individual)
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	26	2017

Transaction ID : 23974792

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Chreist, Stephen, , ,

Mailing Address 65 Pinon Hill Pl. NE

City
AlbuquerqueState
NMZip Code
87122-1914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	26	2017

Transaction ID : 23974793

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

2000.00

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