

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CareSource Mission Political Action Committee (CareSource Mission PAC)

Report Covering the Period: From: 04 / 01 / 2026 To: 06 / 03 / 2026

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2026 (27476.23); (b) Cash on Hand at Beginning of Reporting Period (82205.57); (c) Total Receipts (from Line 19) (72974.22 / 160026.37); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (155179.79 / 187502.60); 7. Total Disbursements (from Line 31) (56097.46 / 88420.27); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (99082.33 / 99082.33); 9. Debts and Obligations Owed TO the Committee (0.00); 10. Debts and Obligations Owed BY the Committee (0.00).

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CareSource Mission Political Action Committee (CareSource Mission PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	61583.83	113761.19
(ii) Unitemized	11390.39	46265.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	72974.22	160026.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	72974.22	160026.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	72974.22	160026.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	72974.22	160026.37

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	14750.00	29072.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14750.00	29072.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	13000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	11.52	11.52
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	11.52	11.52
29. Other Disbursements (Including Non-Federal Donations).....	35335.94	46335.94
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	56097.46	88420.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56097.46	88420.27

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	72974.22	160026.37
34. Total Contribution Refunds (from Line 28(d))	11.52	11.52
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	72962.70	160014.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14750.00	29072.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14750.00	29072.81

**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 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Wyatt, Ashley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Strategy and Business Development Cc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A26A12E12CB104E09A99
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. White, Jessica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, IT Performance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A62DC2C28C9D34A34852
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Braksator, Deanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Market Implementation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A907F8153323D46A79D8
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 7 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Joers, Holly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Military and Veterans
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 05 / 29 / 2026
Transaction ID : AB698FFD91A774DDF8EC
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Davidi, Isaac, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A41C777391A594770857
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Gartner, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Chief of Staff - Wisconsin Market
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : ACDC4C877D4334FDDA3F
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1730.75
TOTAL This Period (last page this line number only).....	

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 8 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Valencia, Devon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A8011E447E49242EBA27
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Hume, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Data Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AFE6460C827054561AEC
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Frost, Courtney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Network Development Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A7D5BD2152293464F9AA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1346.15
TOTAL This Period (last page this line number only).....	

**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 9 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Smitherman, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Regional Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : AAA6EE1EEEEEC4CBAA4
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Castaneda, Vidal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Director, Portfolio Managem
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A023E0010E82245C59A3
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Steadman, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Pharmacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : AD2838CC2AB0E4670B41
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

SUBTOTAL of Receipts This Page (optional).....	2115.40
TOTAL This Period (last page this line number only).....	

**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 10 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Cummings, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Duals Products
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A059C8CD9C3294DFFA96
 Amount of Each Receipt this Period 175.00
 Memo Item
 Payroll Deduction: \$35.00/

B. Youmans, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A2309385992034E56AB8
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Martin Zvolanek, Selene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Corporate Affairs - CareSource Mi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 692.28

Date of Receipt 05 / 29 / 2026
Transaction ID : A8902809DDDF374552A38
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	751.90
TOTAL This Period (last page this line number only).....	

**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 11 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Tischer, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Community Outreach
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AB282E595E868496D952
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$30.00/

B. Dougherty, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Chief Human Resources Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A09BA0C67D3DF417989D
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Russo, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Utilization
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AF798F98A94B74738813
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1496.15
TOTAL This Period (last page this line number only).....	

**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 12 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Stitt, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Behavioral Health - Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AEF381FF861754495BBA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Baumgardner, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Business Resiliency
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A0DEE29632FFD48A4B32
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Phillips, Travis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AF9FA61C4DD9E4B86B2B
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

**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 13 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Johnson, Vanessa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Utilization Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A6E129D4A571D480791B
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Melleby, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Market and Product Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A4BBD716CDB2F4A75B94
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Oplinger, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, West Virginia, and Kentucky
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 04 / 15 / 2026
Transaction ID : A19D225B4B54548D1ABC
 Amount of Each Receipt this Period 76.92
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	846.12
TOTAL This Period (last page this line number only).....	

**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 14 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Zimmerlin, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Compliance Administra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A21A35267522C4FA0AF2
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Musser, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : AF692A6DF01EF47A3AD9
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Bergman, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Accounting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 29 / 2026
Transaction ID : AD9684F6858DC4036AAE
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1346.15
TOTAL This Period (last page this line number only).....	

**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 15 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Schroeder, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Clinical Operations - Care M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A2D7DC9CFE84748CF9EA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Jauhri, Pranay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Operations Configuration and Aut
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AF8F145FC9D9547A1B30
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Cox, Cory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A3C94F9F90C414E4F82F
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

**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 16 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Yerram, Lakshmi Deepa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A8A087E9ECB7047889E4
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Kingery, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Implementation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A71BCA985E9164DFE98C
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Yablonsky, Evan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Counsel II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A735B2EA72AC3468A8E7
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....▶	1153.80
TOTAL This Period (last page this line number only).....▶	

**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 17 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Chang, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Clinical Ope
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AC2900810AFD84612B08
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Shafer, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Claims Oper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A678957C3E9B6420C85B
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Patel, Sunit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Member Enrollment & HPLC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A9F4850435A71436CBF2
 Amount of Each Receipt this Period 250.00
 Memo Item
 Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional).....	826.90
TOTAL This Period (last page this line number only).....	

**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 18 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Yocum, Deirdra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Market Operations - Ohio
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 05 / 29 / 2026
Transaction ID : AAF5BACEDB4064B5DA71
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Kottwitz, Jessica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Market Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A43D6DE29AA164C559A3
 Amount of Each Receipt this Period 250.00
 Memo Item
 Payroll Deduction: \$50.00/

C. Alcazar, Anya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Enterprise Quality Assurance & Ac
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AE2F56645C56140B4AFA
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	826.90
TOTAL This Period (last page this line number only).....	

**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 19 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Henderson, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Financial Oversight -
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AE1EAAA7430894429AF0
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Johnson, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Medical Services - Physical Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A3C69B984F27C4C02885
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Wright, Cameual, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Market
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A96735374C45F40F8923
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 20 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Hanley, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Enterprise A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A0B12162504244BA4B05
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Richardson, Roxanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Strategic Po
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A7CB450A4EC414130838
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Handerhan, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Sales Operations & Account Mana
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A4C0A19915F204808B47
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1153.80
TOTAL This Period (last page this line number only).....	

**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 21 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Musunuri, Sanjoy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) EVP, Strategy & Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.10

Date of Receipt 05 / 29 / 2026
Transaction ID : AF1CB94C192A541B89CB
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Carey, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Community and Partnership Engage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AC5E93C194F844AB2860
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Tipples, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Business Development - State
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : ABDE0DEFA5D744D4CB6E
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 22 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Sturgis, Katie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, HR Growth & Implementation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AF05112AD5EBD4197BFA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Van Allen, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AFB841F72C32464AA26
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Herzog, Kathryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Customer Care
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A0EA8BDC27CD24E87B94
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	961.50
TOTAL This Period (last page this line number only).....	

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 23 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Eckrich, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Mission Occupation (for Individual) Associate Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A3BF982F8223A4E8F9AE
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Nielsen, Mari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Mission Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A8A0576CF18584D3BB6C
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Wallenberg, Bradley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Enterprise Business A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A46E8281A60164603973
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

**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 24 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Hill, Tye, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Health Partners
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A49127CA92D3B47C7B59
 Amount of Each Receipt this Period 250.00
 Memo Item
 Payroll Deduction: \$50.00/

B. Wallace, Lawana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Talent Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A91DC2CCDB50E45218F2
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Barrett, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Network Strategy & Contracting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AB6927EA6FF19456CB68
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....▶	826.90
TOTAL This Period (last page this line number only).....▶	

**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 25 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Donohue, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Market CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A8CB2629745F24968ABA
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Clapper, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Facilities Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A22220416E74E4BA59A8
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Kuschnerus, Konrad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Internal Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A93F3E8A913424068A0C
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 26 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Watroba, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A4E47C3D61F4246DCA87
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Walkowiak, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Sales and Community I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : ACE5F81D4F34E47ED8BA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Johnson, Alexis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Program Integrity
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A74D6A4D9E6924A77964
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....▶	961.50
TOTAL This Period (last page this line number only).....▶	

**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 27 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Davis, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Market Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : ABE8DDCDB71AA4779908
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Treesh, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Vendor Performance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt 05 / 29 / 2026
Transaction ID : A85FED7B466BF4B96B50
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Gray, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Medicare & Marketplace Filin
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A47CD860B2CFB4EB191A
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

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 28 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Fausey, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A7BD69C6A784C494AA10
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Duffy, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A30947F245B4C42A69C4
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Mossburg, Coriana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Director, Governance, Intake
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A4A89355BEFE247DC8A5
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

**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 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Hill, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 05 / 29 / 2026
Transaction ID : A08D9F0159E70440D9B9
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Mizner, Kristi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Capture & Proposal Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AA858A65727254AFDAB9
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Manley, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 05 / 29 / 2026
Transaction ID : A73317A44563A4EDC89B
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	961.50
TOTAL This Period (last page this line number only).....	

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 30 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Williams, Brandon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Managing Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A7410AE2A63C444149E3
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Grismer, Lynn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Total Rewards
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A60B879DFD30B422DB0E
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$40.00/

C. Hutchison, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Market Chief Financial
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AB6A1FB30CDC84B15B61
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	584.60
TOTAL This Period (last page this line number only).....	

**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 31 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Beam, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Corporate Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A8DFC33890B964F22B52
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Schulz, Fred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A47D86475F1D84E1D9E4
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Rose, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, External Strategy - Market
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AA85D55C264714A5A97A
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1730.75
TOTAL This Period (last page this line number only).....	

**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 32 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Stubbers, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Chief Legal Officer (CLO)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A24FBE292F75949C28D6
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Wambua, Francie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Enterprise Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A836ED0E52A9E4227967
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Aburto, Edgar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Clinical Operations - Care M
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A9CAB1CE1F863429DB69
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 33 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Matsubara, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) CPA, CHIE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A089CB14E4ADB4592B72
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Herndon, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A219FC1869D8447EDB85
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Dickerson, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Market Opera
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AF4114942D58E440CA01
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 34 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Corderman, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Capture & Proposal Ma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A5962862DE2E541528C8
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Frazee, Margaux, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A3879DFA755C04753A08
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Alvarez, Sunshine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Health Partner Engagement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A860D333AB2D640EE8F6
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

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 35 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Mukunda, Beejadi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Market Chief Medical O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt 05 / 29 / 2026
Transaction ID : A312B188B4E0440368BF
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Smith, Megan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Strategy and Business Development C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A9A0AD612D13F43F1AC6
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Hardison, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Business Development - State
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 634.70

Date of Receipt 05 / 29 / 2026
Transaction ID : A88C862C8EDE04A12AEC
 Amount of Each Receipt this Period 288.50
 Memo Item
 Payroll Deduction: \$57.70/

SUBTOTAL of Receipts This Page (optional).....	865.40
TOTAL This Period (last page this line number only).....	

**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 36 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Miller, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Community Engagement & Founda
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AAD07D156DA61418582E
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Carlson, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Enterprise Engineering Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : ADF6D6DBA20D647AA942
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Markovich, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Executive Vice President, Markets
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A8A8B2E3E43A74B85BFE
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

SUBTOTAL of Receipts This Page (optional).....	1730.75
TOTAL This Period (last page this line number only).....	

**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 37 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Anderson, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Program Integrity & Retrospective
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AD3D4749557344AC4961
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. York, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Data Solutio
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A7A78366C96374C148B6
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. McKinley, Nichalos, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Growth Solutions Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A5869A149F9564B43AA9
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....▶	961.50
TOTAL This Period (last page this line number only).....▶	

**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 38 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Wilson, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Utilization Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AB6EA3CE17D524F76984
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Puu, Jayme, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, National Network and Strategic S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A654BF35F82004DE2A23
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Turner, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Data Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A1F407EF2B99248FE928
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 39 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Crumb, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Proposal Writing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A68C461224F2B499DAD2
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Painter, Theodore, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Market Operations - CSMV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.28

Date of Receipt 05 / 29 / 2026
Transaction ID : ABDD56FB0071A4D589D3
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Armijo, Penny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AC54FB31605F34BFEA06
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....▶	961.50
TOTAL This Period (last page this line number only).....▶	

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 40 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Brutsman, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Business Development Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A0E6B5C6F18BA4A8EB9E
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Thomas, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Mission Occupation (for Individual) President, Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A16D33F09C45C4309867
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Kubilus, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A215C7A1B45E042338D7
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....▶ 1730.75
TOTAL This Period (last page this line number only).....▶

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 41 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Wilkins, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Cyber Defense
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A11EF254AEBFB4D269A6
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Konrad, Marcia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 01 / 2026
Transaction ID : AFFBD21A7F01F430FBB6
 Amount of Each Receipt this Period 500.00
 Memo Item
 Payroll Deduction: \$500.00/

C. Teich, Moshe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Mission Occupation (for Individual) Director of LTSS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A6BA5128BE1CF4A0795E
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	884.60
TOTAL This Period (last page this line number only).....	

**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 42 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Mahaffey, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President, Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : AA051EDD6E210412FB16
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Chen, Frank, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Actuarial Sc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A10E7CF48D8194EF7BEB
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Koch-Sims, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dental Director, Market
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A7ACAC698F0514A6DB91
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 43 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Skerl, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Treasury
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A0BBD641386464AF0B32
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Bates, Brandy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A8017B4B8C782450C96F
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Walch, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A8919B8932BC44C38940
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 44 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Prokes, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Corporate Communicat
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A534C275BA767407EBA0
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Day, Garry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Brand and Advertising
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AA3AD4984BBF04629954
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Eckley, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N Main St
 City Dayton State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Clinical Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A11E74F40387E4859BF7
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	961.50
TOTAL This Period (last page this line number only).....	

**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 45 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Blumfelder, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Release Train Engineer III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A28AA9BF5AFF247AF9D7
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Risku, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AA5C88B779A81412F824
 Amount of Each Receipt this Period 500.00
 Memo Item
 Payroll Deduction: \$100.00/

C. Sloop, Joshua, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dual Eligible Programs President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A0F1F5A98453D466A81A
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	884.60
TOTAL This Period (last page this line number only).....	

**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 46 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Jackson, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Network Strategy & Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AB92C0596F7E9442EA03
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Davis, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, CBO Partnerships
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A396BEB3D83474CEA860
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Stephan, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AE24BFB35C840455F89B
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	961.50
TOTAL This Period (last page this line number only).....	

**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 47 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Reynolds, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Ent Medical Director, Behavioral Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A0FC243FD84B74EA4864
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Vermiglio, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Delivery and Agile St
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A6057A1D563C649DB814
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Dewey, Nicholas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Clinical Operations & Value Creati
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A7A310F38F3854B0C99D
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

**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 48 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Omran, Gehan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Marketplace Performance and
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A19D10D3FBD344359A0B
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Czarnik, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Analytics Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A525DA0926FDB4362AC2
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Brockman, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Marketplace Strategy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 633.49

Date of Receipt 05 / 29 / 2026
Transaction ID : A4CA9FE15EA874B8FB00
 Amount of Each Receipt this Period 287.95
 Memo Item
 Payroll Deduction: \$57.59/

SUBTOTAL of Receipts This Page (optional).....	672.55
TOTAL This Period (last page this line number only).....	

**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 49 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Magazine-Yount, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Mission Occupation (for Individual) VP, Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AEA52F2BB84AE4E24B40
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

B. Sotak II, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Internal Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AED62CF194D714EAAACA
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Williams, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP, Chief Actuary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A16E17C8D46544E7CB2A
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 50 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Glass, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, State Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : AA0439CA3A5FD488E944
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Suresh, Vimala, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Clinical Applications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : ABA25CA2F5AAB47BCB99
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

C. Fantoni, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Head of National Network and Provider
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A07AA28943DE24FBD987
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

**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 51 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Preitauer, Erhardt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A5B779C2F02264A19865
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Weston, Christina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Medical Services - Behavioral Heal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.76

Date of Receipt 05 / 29 / 2026
Transaction ID : ABefd78B1D2054C69931
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$20.00/

C. Cary, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Service Exce
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : A7E7ADA3AAC004A0B910
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1446.15
TOTAL This Period (last page this line number only).....	

**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 52 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Ashmore, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, End User Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 29 / 2026
Transaction ID : A440F9090554C44C8920
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll Deduction: \$38.46/

B. Sasso, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) SVP & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A2AD2591F8B5D4667AA8
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

C. Bordelon, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Internal Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : ADC6FB82E8C824A95B9A
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional).....	1538.45
TOTAL This Period (last page this line number only).....	

**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 53 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Heckler, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Cybersecurity, Privacy, and Techno
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.41

Date of Receipt 05 / 29 / 2026
Transaction ID : A7CB6B3F2E0184E15B56
 Amount of Each Receipt this Period 961.55
 Memo Item
 Payroll Deduction: \$192.31/

B. Morrow, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Market Insights
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 29 / 2026
Transaction ID : AF3F1C567F0FB4355A22
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$76.92/

C. Shukla, Satendra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Configuration and Automation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AFE7992FC552A4D8A914
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll Deduction: \$30.00/

SUBTOTAL of Receipts This Page (optional).....	1466.15
TOTAL This Period (last page this line number only).....	

**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 54 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. McCabe, Charlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 05 / 29 / 2026
Transaction ID : ADACA314BCEE74EE7A91
 Amount of Each Receipt this Period 307.68
 Memo Item
 Payroll Deduction: \$76.92/

B. Preston, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Market Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A360DE44D18794CEB8E8
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Tremblay, Courtney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Brand & Advertising
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A8058F55BE31C44AFBD4
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	498.06
TOTAL This Period (last page this line number only).....	

**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 55 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Ready, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Digital Stra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A303307FAB1E94C64BE2
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. Lukic, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Portfolio Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A19D7029CFA0D4F4E947
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

C. Tullio, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) AVP, Health Equity
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AC7B8C8B9523646FEAF2
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

SUBTOTAL of Receipts This Page (optional).....	305.76
TOTAL This Period (last page this line number only).....	

**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 56 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Thomas, Clarence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Enterprise Dental Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : AFBEEA0C608BC447EA08
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. Groenewegen, Leanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Director, Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A33163D2A483A4B2C858
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

C. Neal, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 01 / 2026
Transaction ID : A1F1E059BC92841D787A
 Amount of Each Receipt this Period 245.00
 Memo Item
 Payroll Deduction: \$245.00/

SUBTOTAL of Receipts This Page (optional).....	475.76
TOTAL This Period (last page this line number only).....	

**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 57 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Gillard, Josslyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A8EB58204DCD94AB4B37
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

B. Scott, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AA74A87FA5C754421951
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Young, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Human Resources Communication Stra
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 01 / 2026
Transaction ID : A51BA9E1DE92442D5AF0
 Amount of Each Receipt this Period 245.00
 Memo Item
 Payroll Deduction: \$245.00/

SUBTOTAL of Receipts This Page (optional).....	395.00
TOTAL This Period (last page this line number only).....	

**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 58 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Hans, Holly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A7B42DC793F45430F909
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

B. Bell, Justin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Treasury
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AA1CBEE5637134BF7B14
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Moots, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Information Security - IT Ri
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A0690775ADAA145AE914
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**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 59 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Adolph, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Ent Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A025F29475ABB4D8E9B1
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. DeLury, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Vice President, Total Rewards
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A915C7756775348629A4
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Johnson, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Claims
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A59253EF6009B496EA09
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

SUBTOTAL of Receipts This Page (optional).....	265.38
TOTAL This Period (last page this line number only).....	

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 60 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Gartenman, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Strategy and Business Development Cc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A8287B09DCD7D40CA85C
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. Aldrich, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 01 / 2026
Transaction ID : A630C3853AAA04B55BDE
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Payroll Deduction: \$2500.00/

C. Sloan, Trica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Brand, Design, and Web
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : AE6532388DDAA4CF59BA
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	2730.76
TOTAL This Period (last page this line number only).....	

**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 61 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Lowery, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Clinical Operations - Care M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : ABA41B790ABAF46C78C1
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. Brady, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Market Intelligence
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A03FD484EA6B04B7E947
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Balsler, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A0C0A87EC2F9D441899B
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional).....	305.76
TOTAL This Period (last page this line number only).....	

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 62 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Blanton, Shelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Utilization Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 05 / 29 / 2026
Transaction ID : A1C44E5FB967A47CE992
 Amount of Each Receipt this Period 115.38
 Memo Item
 Payroll Deduction: \$38.46/

B. Snyder, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Mgr, Medical Economics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A0F8C2BCBD72449DDBEB
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction: \$25.00/

C. Bogнар, Jenniffer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Enterprise Consumer Experien
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AC842EC6B2216414281A
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional).....	210.38
TOTAL This Period (last page this line number only).....	

**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 63 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Keim, Joell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) VP, Quality Revenue Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 05 / 29 / 2026
Transaction ID : A1ED95AE9367D402DBBA
 Amount of Each Receipt this Period 76.92
 Memo Item
 Payroll Deduction: \$76.92/

B. Hennessey, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Manager, Customer Care Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A1F863C04CA7C4DD6844
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

C. Steele, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Manager, Pharmacy Community Program
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A18183A79B09E4F3E83B
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

SUBTOTAL of Receipts This Page (optional).....	115.38
TOTAL This Period (last page this line number only).....	

**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 64 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Bogacki, Loretta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Clinical Operations Program Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A00EEB575AE0E44FB96C
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

B. Kiser, Gavin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A787FB6AC855944A8BBB
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

C. Duffy, Alexandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Sr. Manager, Social Media
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A85B7FA8D414E499BA2F
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

SUBTOTAL of Receipts This Page (optional).....▶	58.46
TOTAL This Period (last page this line number only).....▶	

**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 65 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Phelps, Maria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Enterprise Risk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AF6203357917E47D6858
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

B. Liendo, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Manager, Market Insights - Medicaid
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A6EFF629D966D4A6DA03
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

C. Bierstedt, Marci, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Compliance Detection
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A5E5443F3453E4987AA6
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional).....	59.23
TOTAL This Period (last page this line number only).....	

**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 66 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Ar-Raheem Williams, Sadirah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 05 / 29 / 2026
Transaction ID : AAAE0A0BA186C43738F5
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll Deduction: \$38.46/

B. Hamilton, Jessica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 05 / 29 / 2026
Transaction ID : AF9E266A7FDA74BACAF1
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll Deduction: \$38.46/

C. Kannappan, Sangeetha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Manager, Enterprise Quality Eng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : AC51CDF8710CC4450842
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

SUBTOTAL of Receipts This Page (optional).....	96.15
TOTAL This Period (last page this line number only).....	

**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 67 OF 76
	<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Reed, Jesse, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Director, Life Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A9F2000BB09404585B90
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

B. Thompson, Taylor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 05 / 29 / 2026
Transaction ID : AF0FC091B68DE432DA60
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll Deduction: \$38.46/

C. Barbee, Kirsten, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Manager, Utilization Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A8D4DD90819BE4F5DA20
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

SUBTOTAL of Receipts This Page (optional).....▶	76.92
TOTAL This Period (last page this line number only).....▶	

**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 68 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Perry, Asa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Manager, Information Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : A114C0042488B40DC897
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

B. Korte, Jody, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Vice President, Strategic Co
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : AD5B81739A429417DA46
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

C. Steffen, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 29 / 2026
Transaction ID : AC327B903CC814C2BA84
 Amount of Each Receipt this Period 19.23
 Memo Item
 Payroll Deduction: \$19.23/

SUBTOTAL of Receipts This Page (optional).....▶	58.46
TOTAL This Period (last page this line number only).....▶	

**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 69 OF 76
<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)
CareSource Mission Political Action Committee (CareSource Mission PAC)

A. Broering, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Dir, Market Planning & Performance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A8275BA30F9B145E2B2E
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

B. Tomas, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Senior Director, Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A085D94C7836D4AAFAE0
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

C. Valley, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E State St
 City Columbus State OH Zip Code 43215-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CareSource Occupation (for Individual) Associate Director, Data Governance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2026
Transaction ID : A3F012130E3964DBE984
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	61583.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. Milthorpe Sports, LLC

Mailing Address 74075 El Paseo

City
Palm Desert

State
CA

Zip Code
92260-4118

Purpose of Disbursement

Tent Rental for Event

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	6

FEC Identification Number

C _____

Transaction ID : B737EF55CA

Amount of Each Disbursement this Period

_____ 8750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ohlmann Group

Mailing Address 130 W 2nd St. Suite 1050

City
Dayton

State
OH

Zip Code
45402-1508

Purpose of Disbursement

Website Development

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

FEC Identification Number

C _____

Transaction ID : B5E6BFD816:

Amount of Each Disbursement this Period

_____ 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C _____

Amount of Each Disbursement this Period

Memo Item

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

_____ 14750.00

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

_____ 14750.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. JEFFRIES FOR CONGRESS

Mailing Address PO BOX 65322

City
WASHINGTON

State
DC

Zip Code
20035

Purpose of Disbursement

Political Contribution

Candidate Name

Jeffries, Hakeem, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: NY District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2026

FEC Identification Number

C C00503052

Transaction ID : B6B6A5ACD

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAREY FOR CONGRESS

Mailing Address PO BOX 16032

City
COLUMBUS

State
OH

Zip Code
43216

Purpose of Disbursement

Political Contribution

Candidate Name

Carey, Mike, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2026

FEC Identification Number

C C00779603

Transaction ID : B8C1D719837

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HUSTED FOR SENATE

Mailing Address PO BOX 6290

City
Columbus

State
OH

Zip Code
43206-0290

Purpose of Disbursement

Political Contribution

Candidate Name

Husted, Jon, A., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2026

FEC Identification Number

C C00896019

Transaction ID : B7479770534

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6000.00

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

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. Farmer, Christine, , ,

Mailing Address 65 E State St

City
Columbus

State
OH

Zip Code
43215-4213

Purpose of Disbursement

Refund of Contribution Received

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	6

FEC Identification Number

C []

Transaction ID : B2BFF74BC2

Amount of Each Disbursement this Period

[] 5.76

Memo Item

Full Name (Last, First, Middle Initial)

B. Lee, Kahlilah, , ,

Mailing Address 65 E State St

City
Columbus

State
OH

Zip Code
43215-4213

Purpose of Disbursement

Refund of Contribution Received

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	6

FEC Identification Number

C []

Transaction ID : BADE14E348

Amount of Each Disbursement this Period

[] 5.76

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 11.52

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

[] 11.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Nick McKinley

Mailing Address PO Box 2

City
Marion

State
IN

Zip Code
46952-0002

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	2	6		

FEC Identification Number

C [Redacted]
Transaction ID : BBF3CF5F5F
Amount of Each Disbursement this Period
[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Gaskill for Indiana

Mailing Address 6838 South 50 West

City
Pendleton

State
IN

Zip Code
46064

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	2	6		

FEC Identification Number

C [Redacted]
Transaction ID : BC383F9BD1!
Amount of Each Disbursement this Period
[Redacted] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Mayfield Campaign

Mailing Address 50 S. Madison Street

City
Mooreville

State
IN

Zip Code
46158

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	2	6		

FEC Identification Number

C [Redacted]
Transaction ID : B9E356EFD8
Amount of Each Disbursement this Period
[Redacted] 1000.00

Memo Item

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

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

[Redacted]	2500.00
[Redacted]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. Wilkin for Ohio

Mailing Address 4151 E Danville Rd
PO Box 384

City Hillsboro

State OH

Zip Code 45133-8729

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2026

FEC Identification Number

C [Redacted]

Transaction ID : B028AAEAC

Amount of Each Disbursement this Period

[Redacted] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Republican Senate Campaign Committee (RSCC)

Mailing Address 4679 Winterset Drive

City Columbus

State OH

Zip Code 43220-8113

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) Other

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2026

FEC Identification Number

C [Redacted]

Transaction ID : B5D8B237EC

Amount of Each Disbursement this Period

[Redacted] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Matt Huffman for Ohio

Mailing Address 4679 Winterset Dr

City Columbus

State OH

Zip Code 43220

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2026

FEC Identification Number

C [Redacted]

Transaction ID : BD0EB96223

Amount of Each Disbursement this Period

[Redacted] 13500.00

Memo Item

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

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

[Redacted] 19500.00

[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareSource Mission Political Action Committee (CareSource Mission PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Susan Manchester

Mailing Address 77 South High Street, Floor 13

City Columbus State OH Zip Code 43216

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2028
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2026

FEC Identification Number

C
Transaction ID : B00DD6A101
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NCR Country Club

Mailing Address 4435 Dogwood Trl

City Dayton State OH Zip Code 45429-1239

Purpose of Disbursement
In-kind for Matt Huffman Golf Outing

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2026

FEC Identification Number

C
Transaction ID : B291888BFB!
Amount of Each Disbursement this Period
2835.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Calvin Callahan

Mailing Address PO Box 260

City Tomahawk State WI Zip Code 54487-0260

Purpose of Disbursement
Non-Federal Political Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2026

FEC Identification Number

C
Transaction ID : BA95D37A9e
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

8835.94
35335.94