

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CareSource Management Services Co. PAC

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

A. Thom, Jude, Jonas, ,

Mailing Address 230 N. Main Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Caresource Management GroupOccupation (for Individual)
VP, Behavioral Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2018
Transaction ID : PR77536736688

Amount of Each Receipt this Period

133.84

☐ Memo Item

P/R Deduction (\$66.92 Bi-Weekly)

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

B. Gartner, James, A., ,

Mailing Address 230 N. Main Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Caresource Management GroupOccupation (for Individual)
VP, Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2018
Transaction ID : PR79040436688

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

C. Michael, Jenny, Rebecca, ,

Mailing Address 230 N. Main Street

City
DaytonState
OHZip Code
45402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Caresource Management GroupOccupation (for Individual)
VP, Marketing & Corp Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2018
Transaction ID : PR79040736688

Amount of Each Receipt this Period

55.38

☐ Memo Item

P/R Deduction (\$27.69 Bi-Weekly)

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

289.22

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