

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

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

FOR LINE NUMBER: PAGE 32 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bloomin' Brands, Inc. Political Action Committee

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

A. FREEMAN, DEBBIE, , ,

Mailing Address 6591 NW 52 STREET

City
Coral Springs

State
FL

Zip Code
33067-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
Joint Venture Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : A8C1CD8B430AB40D6A85

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. ARNOLD, JEFFREY, , ,

Mailing Address 117 RAMSEY AVE

City
Marlton

State
NJ

Zip Code
08053-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : AB88EA1621BB14222855

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CROWDER, JOHN, , ,

Mailing Address 4431 AUTUMN RIVER RD. E

City
Jacksonville

State
FL

Zip Code
32224-7596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Field OSRS

Occupation (for Individual)
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : A4AF1F05AF0B34FBC8AB

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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