

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

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

FOR LINE NUMBER: PAGE 6 OF 51

(check only one)

☒ 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. Allison, Jonathan, 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)  
EVP, External Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 18 / 2017

Transaction ID : 10307129

Amount of Each Receipt this Period

225.00

☐ Memo Item

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

B. Gartner, James, A., ,

Mailing Address 230 North Main Street

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

C

Name of Employer (for Individual)  
CareSource Management ServicesOccupation (for Individual)  
VP, Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 18 / 2017

Transaction ID : 10307131

Amount of Each Receipt this Period

225.00

☐ Memo Item

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

C. Garland, Patrick, , ,

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 of IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2017

Transaction ID : 10361263

Amount of Each Receipt this Period

145.00

☐ Memo Item

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

595.00

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