

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

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

FOR LINE NUMBER: PAGE 672 OF 2837

(check only one)

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

CHC BOLD PAC

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

A. Doss, John, , ,

Mailing Address 27 Knotty Pine Pl

City
Texarkana

State
TX

Zip Code
75503-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Iasis Health Care

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2018

Transaction ID : VTEJXSZH502

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Doss, John, , ,

Mailing Address 27 Knotty Pine Pl

City
Texarkana

State
TX

Zip Code
75503-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Iasis Health Care

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2018

Transaction ID : VTEJXTAW646

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Doty, Jill, , ,

Mailing Address 13004 Shamus Ct

City
Louisville

State
KY

Zip Code
40299-5183

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

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
09 / 17 / 2018

Transaction ID : VTEJXTAXQ16

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

125.00

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