

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 GE HealthCare Technologies Inc. PAC

ADDRESS (number and street) 600 14th St NW Suite 900 Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00830208 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (Non-election Year Only) (MY) [X], Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2023 through 06 / 30 / 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Duncan, Monica, , , Type or Print Name of Treasurer

Signature of Treasurer Duncan, Monica, , , [Electronically Filed] Date 07 / 31 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

GE HealthCare Technologies Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="74387.83"/>	<input type="text" value="74387.83"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="74387.83"/>	<input type="text" value="74387.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33579.92"/>	<input type="text" value="33579.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="40807.91"/>	<input type="text" value="40807.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GE HealthCare Technologies Inc. PAC

Report Covering the Period: From: 01 / 01 / 2023 To: 06 / 30 / 2023

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).....	46657.00	46657.00
(ii) Unitemized	27730.83	27730.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	74387.83	74387.83
(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)	74387.83	74387.83
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)).....▶	74387.83	74387.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	74387.83	74387.83

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	79.92	79.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	79.92	79.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33500.00	33500.00
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	0.00	0.00
(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)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	33579.92	33579.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33579.92	33579.92

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)	74387.83	74387.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	74387.83	74387.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	79.92	79.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	79.92	79.92

**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 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
GE HealthCare Technologies Inc. PAC

A. Araya, Semhal, Tadesse, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Principal, Strategic Advisory Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : BA21FB5A6B6146FCA5C7
 Amount of Each Receipt this Period 240.00
 Memo Item

B. Arduini, Peter, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 39B5E5D6E3784D21B635
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Arduini, Peter, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : 33876C53854F46E5BB49
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1072.00
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 7 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Arduini, Peter, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : D5A84352C70F43FDBF49
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Arduini, Peter, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : F040D5386FCA4217BBB6
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Arduini, Peter, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : EE6EFBB431414B429AC8
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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 8 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Beacham, Jimmie, A, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Engineer - AME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 5DD31C5EC6064BBEBE46
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Beacham, Jimmie, A, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Engineer - AME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 25F7A9346F9C40EABE44
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Beacham, Jimmie, A, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Engineer - AME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 817B26E19EFF48DCAEE7
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 9 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Beard, John, Walker, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Medical Officer, Patient Care So
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 56EDFF633C404C55ABE6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Beard, John, Walker, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Medical Officer, Patient Care So
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 58737B5822574EAD961B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Bender, Mindy, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Lean Leader WH/XRY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 02 / 24 / 2023
Transaction ID : A73AFBACC9CB4DC88B76
 Amount of Each Receipt this Period 700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 10 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Bender, Mindy, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Lean Leader WH/XRY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 03 / 24 / 2023
Transaction ID : F31ED0764DCD4E889E7
 Amount of Each Receipt this Period 700.00
 Memo Item

B. Biscotti, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) South Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 02 / 24 / 2023
Transaction ID : BC00F05F831A4BF39E22
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Biscotti, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) South Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 03 / 24 / 2023
Transaction ID : C3972D6D2D43438582B6
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1116.00
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:	PAGE 11 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Biscotti, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) South Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : EF2AC63769B54B39848C
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Biscotti, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) South Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 5045278A5CA0449DBB68
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Biscotti, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) South Region President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 92FC7AFDC2F74E23B34E
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	624.00
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:	PAGE 12 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Blee, Robert, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Capital Markets Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 5C147CB9D9C542BABE20
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Blee, Robert, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Capital Markets Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 83E9EB9CA1914C5CA2AA
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Blee, Robert, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Capital Markets Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 883E94DC062141839D0E
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 13 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Brown, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President, CoRE Partnerships and Serv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 002D6A90D9714BAABEA8
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Brown, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President, CoRE Partnerships and Sen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : F7BD6EFB192F480DA6CD
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Brown, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President, CoRE Partnerships and Servi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 2C82BD09AAAA4EF7B8B4
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 14 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Butler, Truman, Kirkland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Enterprise Risk Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 1B52CBDAE18A4EF8AB28
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Butler, Truman, Kirkland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Enterprise Risk Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : DA79129E297948B4A6F2
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Butler, Truman, Kirkland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Enterprise Risk Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : A1F0A7B7CAB34DE9BFD4
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 15 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Claus-Landi, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Assistant Treasurer, Global Treasury O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 3CCD9B23CC80483BA595
 Amount of Each Receipt this Period 116.00
 Memo Item

B. Crew, Jason, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : B22770EBE6084E30B04C
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Crew, Jason, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 97F573DA023E4E3A91EE
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	232.00
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 16 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Crew, Jason, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : E259B6C4573C41E1A9A4
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Cubbin, Renae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President and Senior Tax Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 02 / 24 / 2023
Transaction ID : 66AB5FEFF34A4C7FBBE8
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Cubbin, Renae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President and Senior Tax Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 4EE1F132591045FDBD4D
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	458.00
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 17 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Cubbin, Renae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President and Senior Tax Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 444AFB6E9FB0401499E5
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Cubbin, Renae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President and Senior Tax Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 49BD64AFDD484FBFB96D
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Cubbin, Renae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President and Senior Tax Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : A9A0CD7FF6FD4E08A803
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
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:	PAGE 18 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Delao, Andrew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Marketing & Strategy Officer, US
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 05 / 19 / 2023
Transaction ID : AD579FA8CDB7490B83A9
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Delao, Andrew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Marketing & Strategy Officer, US
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 3776E3A90E7541E6A7BD
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Donohoe, Michael, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 02 / 24 / 2023
Transaction ID : 606C9E99DE0A412A908B
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	324.00
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 19 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Donohoe, Michael, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : 5685CEBAC0624BBDBDCI
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Donohoe, Michael, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 83D12DB0DA6A4F148879
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Donohoe, Michael, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : C22F0DC67FB54DF2B58D
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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:	PAGE 20 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Donohoe, Michael, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 7EAEAD4AC88C44079A4A
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Donohue, Kevin, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Sr. International Tax Counsel and Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : BCF0DEF4B54E496BBEA6
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Dunham, Dustin, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Medical Services, Ameri
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : D1138658B0CF44C6A935
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	324.00
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 21 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Dunn, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Cyber Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 06547F7EADFD4C19AC59
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Dunn, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Cyber Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : C4F2E53BD6FE4A54A082
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Dunn, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Cyber Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : AD846734F9DB4C96AF08
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 22 OF 98
	<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	

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)
GE HealthCare Technologies Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EI-Demerdash, Mohamed, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 5DAEBB70F0A24D008A37
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) USCAN Service Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EI-Demerdash, Mohamed, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 5F04B6E008D941D0BAC9
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) USCAN Service Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. EI-Demerdash, Mohamed, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 84299505AFEF44AB9594
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) USCAN Service Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EI-Demerdash, Mohamed, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 77E70441531A42688FB9
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) USCAN Service Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EI-Demerdash, Mohamed, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7BDC9629555445F196CD
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) USCAN Service Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Epane-Osuala, Abigail, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 1861EA4C9F2A41628196
Name of Employer (for Individual) GE Healthcare		Occupation (for Individual) Global Head of DEI and HR Strategic In
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="400.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Epane-Osuala, Abigail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Head of DEI and HR Strategic In
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 16 / 2023
Transaction ID : FA9940F2EA7E4BCAB4CE
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Estrampes, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare USC/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 24 / 2023
Transaction ID : 21AEABA855534402AD96
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Estrampes, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare USCA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 24 / 2023
Transaction ID : A5BB2BF8245346E28076
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 25 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Farr, Cassandra, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Executive - Specialty Channels Leader
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2023

Transaction ID : 6ABF0041B3AE46B8B1CB

Amount of Each Receipt this Period
58.00

Memo Item

B. Farr, Cassandra, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Executive - Specialty Channels Leader
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2023

Transaction ID : 33CC0FF8E33740EDA198

Amount of Each Receipt this Period
58.00

Memo Item

C. Farr, Cassandra, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Executive - Specialty Channels Leader
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2023

Transaction ID : 29CFA321B02540BF8D0D

Amount of Each Receipt this Period
58.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 26 OF 98
	<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	

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)
GE HealthCare Technologies Inc. PAC

A. Ganesan, Prakash, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Director, Supply Chain Design & Optimi
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2023

Transaction ID : 0DE8A07ABE6B41DC9CB8

Amount of Each Receipt this Period
240.00

Memo Item

B. Garretson, Michael, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Digital Product Quality Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2023

Transaction ID : 4A5DB1E12F054D4F98E5

Amount of Each Receipt this Period
58.00

Memo Item

C. Gilbreath, Rachel, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) North East Region President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
832.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2023

Transaction ID : 7EDB071A26854FC49F80

Amount of Each Receipt this Period
208.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	506.00
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:	PAGE 27 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Gilbreath, Rachel, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) North East Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : D6408467A5344378A481
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Gilbreath, Rachel, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) North East Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 80F5ED33F87C4742B9F2
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Gilbreath, Rachel, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) North East Region President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 0FFD55A91A934037B0C6
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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:	PAGE 28 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goyette, Mark, J, ,		Date of Receipt MM / DD / YYYY 04 / 21 / 2023 Transaction ID : 3CDF3E7EBD944CB79A23
Mailing Address 500 West Monroe Street		Amount of Each Receipt this Period 58.00
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Monitoring Solutions Supply Chain Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Goyette, Mark, J, ,		Date of Receipt MM / DD / YYYY 05 / 19 / 2023 Transaction ID : 2A9B92FDE09D4BFFA3A3
Mailing Address 500 West Monroe Street		Amount of Each Receipt this Period 58.00
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Monitoring Solutions Supply Chain Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Goyette, Mark, J, ,		Date of Receipt MM / DD / YYYY 06 / 16 / 2023 Transaction ID : 4418FEA6E9D4422AA490
Mailing Address 500 West Monroe Street		Amount of Each Receipt this Period 58.00
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Monitoring Solutions Supply Chain Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 348.00	

SUBTOTAL of Receipts This Page (optional).....▶	174.00
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:	PAGE 29 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Gurney, Laila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Quality & Regulatory Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2023
Transaction ID : F6FD9B8C258F4CEF99A1
 Amount of Each Receipt this Period
 416.00
 Memo Item

B. Gurney, Laila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Quality & Regulatory Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2023
Transaction ID : 25E75AAB36AA4CB3ACB8
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Gurney, Laila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Quality & Regulatory Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2023
Transaction ID : 5818F26266B44E4DB6AC
 Amount of Each Receipt this Period
 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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 30 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Gurney, Laila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Quality & Regulatory Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 7A51224C5B1047D09539
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **01 / 27 / 2023**
Transaction ID : 76849280854B41569DCB
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 062896FA3BFC490F8AEB
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	832.00
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:	PAGE 31 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2023
Transaction ID : 06D557D7BFB347E7A4AC
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2023
Transaction ID : B8B028A6C19443EBA1D1
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2023
Transaction ID : 0E00029F065F4A06862F
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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 32 OF 98
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Halstrom, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 49C5D356578E4C44B654
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Hannon, Pamela, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Retirement & Healthcare Le
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 41439462DB2A4683A3B2
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Hannon, Pamela, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Retirement & Healthcare Le
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : E41E98588AA54151A0B8
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	324.00
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 33 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Hannon, Pamela, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Retirement & Healthcare Le
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : B967A95E79E54D80B7E4
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Herring, Tamara, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President - Dallas
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 05 / 19 / 2023
Transaction ID : D48691A8DBB94B9789F9
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Herring, Tamara, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President - Dallas
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 06 / 16 / 2023
Transaction ID : C575AFA3E5D8487DBC86
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 174.00
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 34 OF 98
	<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	

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)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2023

Transaction ID : 2CED5E1630EE4BA4A2FA

Amount of Each Receipt this Period
220.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2023

Transaction ID : 671A284F75DC4235B905

Amount of Each Receipt this Period
220.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2023

Transaction ID : C07C4E947ABB44A18311

Amount of Each Receipt this Period
220.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	660.00
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 35 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2023

Transaction ID : FED2C7516A134A97A1BE

Amount of Each Receipt this Period
220.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2023

Transaction ID : 0BD44899DBE74B34B812

Amount of Each Receipt this Period
220.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, John, C, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2023

Transaction ID : 9DB1B7E6044C417E9C51

Amount of Each Receipt this Period
220.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	660.00
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:	PAGE 36 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)
GE HealthCare Technologies Inc. PAC

A. Holevas, Tracey, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Clinical Research Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 8DA55909D5DD435CBD44
 Amount of Each Receipt this Period 75.00
 Memo Item

B. Homer, Jennifer, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Senior Counsel, HEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 3A16E7F952A64A3C81E7
 Amount of Each Receipt this Period 240.00
 Memo Item

C. Hurley, James, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM Handheld Ultrasound
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 16 / 2023
Transaction ID : E4B70B6E036843E99597
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	373.00
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 37 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Ivey, Ian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Senior Compliance Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 24 / 2023
Transaction ID : CD3CA92B24774CFD905D
 Amount of Each Receipt this Period 240.00
 Memo Item

B. Jendusa Orrico, Jennifer, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Compliance Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 48A3663975FC47F79B59
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Jendusa Orrico, Jennifer, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Compliance Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt 04 / 21 / 2023
Transaction ID : D5CC0B3F41C04B8D9F67
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	656.00
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 38 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Jendusa Orrico, Jennifer, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Compliance Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 467829043E594BF5847E
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Jendusa Orrico, Jennifer, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Compliance Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 6F8AF97267354B05B6DF
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Jenkins, Emily, Everett, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President _ Chesapeake
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 0EDAAECC6DCB4485A6B3
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	474.00
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 39 OF 98
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Jenkins, Emily, Everett, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President _ Chesapeake
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 5E9032C01B8A425CACDE
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Jimenez, Frank, Ruben, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) General Counsel, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 01 / 27 / 2023
Transaction ID : 6D2103A58A0647CBABA7
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Jimenez, Frank, Ruben, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) General Counsel, GE Healthcare
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 02 / 24 / 2023
Transaction ID : 73ACD79AB3AD42A19FCB
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	890.00
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: PAGE 40 OF 98
(check only one)

<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)
GE HealthCare Technologies Inc. PAC

A. Jimenez, Frank, Ruben, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) General Counsel, GE Healthcare
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2023

Transaction ID : FA1765EDFCA41E7ACF#

Amount of Each Receipt this Period
416.00

Memo Item

B. Jimenez, Frank, Ruben, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) General Counsel, GE Healthcare
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2023

Transaction ID : 1ABD66ED9B47495B9CCC

Amount of Each Receipt this Period
416.00

Memo Item

C. Jimenez, Frank, Ruben, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) General Counsel, GE Healthcare
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2023

Transaction ID : E5CF1041A58D49389C45

Amount of Each Receipt this Period
416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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:	PAGE 41 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Jimenez, Frank, Ruben, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) General Counsel, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 1AAD06EE4D1D4AD28358
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Johnson, Thomas, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) HR Operations Leader / HR SMO Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 05 / 19 / 2023
Transaction ID : C3078585176F480F8DED
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Johnson, Thomas, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) HR Operations Leader / HR SMO Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 06 / 16 / 2023
Transaction ID : E64E09B19E534EE5BDA8
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	532.00
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 42 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Tyler, J, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) MR Modality Service GM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2023

Transaction ID : 51EFBC4602DE48A4BBAC

Amount of Each Receipt this Period
58.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Tyler, J, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) MR Modality Service GM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2023

Transaction ID : 1E4C453DBF0345C7B206

Amount of Each Receipt this Period
58.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Tyler, J, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) MR Modality Service GM
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2023

Transaction ID : 1182F7033C924293BA67

Amount of Each Receipt this Period
58.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 43 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Kautzer, Jeffrey, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Electrical Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 06 / 16 / 2023
Transaction ID : F73FB983DC384AA192B7
 Amount of Each Receipt this Period 34.00
 Memo Item

B. Kelley, Scott, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Medical Safety Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 2F092B909E0E40A2BE19
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Khandaker, Jahidul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 02 / 24 / 2023
Transaction ID : A2F741C2ABE54D5287A9
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	317.00
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:	PAGE 44 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Khandaker, Jahidul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : D5C7B5D3EC27472994F3
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Khandaker, Jahidul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : B160F5A6320646B3AE73
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Khandaker, Jahidul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 50D799440288400F99A6
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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 45 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Khandaker, Jahidul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 8A7663FDD03644FF971C
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Kirschner, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP, Global Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 9C993A9490154F0E8878
 Amount of Each Receipt this Period 832.00
 Memo Item

C. Kirschner, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP, Global Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 5C3FB1A83C6E4C708290
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1456.00
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:	PAGE 46 OF 98
(check only one)	
<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)
GE HealthCare Technologies Inc. PAC

A. Kulka, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 1A100D5CEFFB47D79F75
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Kulka, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : B16C791A6C0049C1AE78
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Kulka, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : C96493C63A5D409E9910
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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:	PAGE 47 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Kulka, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 4BE5C031797F490AB1C6
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Kulka, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 71248950B5D647478B59
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Kutcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Price Setting Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : 6246C82001D74CE98156
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	716.00
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:	PAGE 48 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Larson, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 7ED0126F921D4B158F6D
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Larson, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : BDA48B822325482C93C6
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Larson, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 13D08CCB885E485D8401
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 49 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Larson, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 04B06048DEE547F99B43
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Larson, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 22DC1E8C4E8C424C9DBC
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Lauth, Jenny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Securities and Governance Couns
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 73D5F54BD5C34F7691BE
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	508.00
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:	PAGE 50 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Lauth, Jenny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Securities and Governance Coun
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 19ECAB00937F42FFBA08
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Lauth, Jenny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Securities and Governance Coun
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 09772BD290EC400F9284
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Lauth, Jenny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Securities and Governance Coun
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : B990E27C8E234D00A3BD
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
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:	PAGE 51 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

A. Leeds, Thomas, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Engineering Manager, Global Detectors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 1B4D9274F8D74B37AF57
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Leeds, Thomas, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Engineering Manager, Global Detectors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 6B4EEB62729B4975B3C0
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Leeds, Thomas, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Engineering Manager, Global Detectors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 4924A91F95074FFDAEC5
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 52 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Letson, Hilarie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Head of Business Continuity Re
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 6E2F4669D5DC4A53A5EF
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Li, Zhu, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global 1.5T Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 29B137EFFFF248E382EE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Li, Zhu, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global 1.5T Segment
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 80C7B28FA4BC4CCEBD85
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	258.00
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 53 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Li, Zhu, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global 1.5T Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 363E031A904D488782B2
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Li, Zhu, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global 1.5T Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 80E7128C450A4276B39C
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Lombardi, Mark, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) USCAN Business Leader, HFS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : A1553B8DFB6E448A8F44
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	258.00
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 54 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Lombardi, Mark, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) USCAN Business Leader, HFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 9CC7F7AD2DF6436D8BFE
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Lombardi, Mark, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) USCAN Business Leader, HFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : FC23AA57D46242EFB8DA
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Marcella, Orrin, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Pol
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : F994A6C72AA84AFC8036
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	316.00
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:	PAGE 55 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Marcella, Orrin, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Pol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : BC63E803DB3649838E9D
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Marcella, Orrin, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Po
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 1F56A2EFA3174DEF98E5
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Marcella, Orrin, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Pol
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 201D9FC0B6F94E3585E4
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
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 56 OF 98
	<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	

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)
GE HealthCare Technologies Inc. PAC

A. Marcella, Orrin, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Pol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 9EF780110FE842A7BFC4
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Metsa, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Account Executive Strategic Clients
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 69B59E6C80104C10B181
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Metsa, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Account Executive Strategic Clients
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : FC645770FE524396BA05
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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:	PAGE 57 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

A. Milbeck, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) General Counsel, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 767C0E41E7E747F9805C
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Milbeck, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) General Counsel, USCAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 3E4C6CF596C845D09348
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Mlenar, Sean, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Transfer Pricing Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : A143441346694A3FA33B
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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:	PAGE 58 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Mlenar, Sean, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Transfer Pricing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 17B61F5DDE5541C88248
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Mlenar, Sean, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Transfer Pricing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 5DED287E1DAD4A948CC1
 Amount of Each Receipt this Period 58.00
 Memo Item

c. Montgomery, Brian, Christopher, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 2B1E0F34EC6846219611
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	241.00
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:	PAGE 59 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

A. Montgomery, Brian, Christopher, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : 3090BCAE17DE4BF968A
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Montgomery, Brian, Christopher, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 1477087EA1824A6FB006
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Montgomery, Brian, Christopher, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : D592B83CA534428B89CA
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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:	PAGE 60 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Montgomery, Brian, Christopher, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 88292E4D364741DA93E3
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Motley, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Ultrasound Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : E1000F91F5124896A763
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Motley, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Ultrasound Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : F29B6347963B468BACEA
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	241.00
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:	PAGE 61 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Motley, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Ultrasound Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 75073AC85B6A4C5BAFA3
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Muralidharan, Girish, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) SVP & GM, Enterprise Imaging and Ad
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 03D5236E2DD74FB0BAE0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Newcomb, George, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GEHC Global Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 222.33

Date of Receipt 02 / 24 / 2023
Transaction ID : 611D9E5CE6C345B083F9
 Amount of Each Receipt this Period 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	318.00
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:	PAGE 62 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Newcomb, George, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GEHC Global Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.33

Date of Receipt **03 / 24 / 2023**
Transaction ID : D91887D6ABE34FA6B255
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Newcomb, George, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GEHC Global Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.33

Date of Receipt **04 / 21 / 2023**
Transaction ID : D8F49759AF3C43B9B905
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Newcomb, George, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GEHC Global Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.33

Date of Receipt **05 / 19 / 2023**
Transaction ID : C8CA336F03F449C3B212
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3.00
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 63 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Newcomb, George, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GEHC Global Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.33

Date of Receipt 06 / 16 / 2023
Transaction ID : F8574D276C234DD89F8F
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Newcombe-Dierl, Elizabeth, Carol, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Quality Executive - WHXR & IGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 18D0D284C0A04A1095FC
 Amount of Each Receipt this Period 700.00
 Memo Item

C. Nustad, Timothy, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, X Ray
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 47748A6F2C504CE89F57
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	759.00
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:	PAGE 64 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nustad, Timothy, A, ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 8E2426DE304C453BBC2A
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="58.00"/>
Occupation (for Individual) Chief Technology Officer, X Ray		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="348.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nustad, Timothy, A, ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 2738F71DD00A4E2EBF42
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="58.00"/>
Occupation (for Individual) Chief Technology Officer, X Ray		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="348.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. O'Keef, Robert, , ,		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2023"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 0F67C3A0564C4A1099B6
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Treasurer, GE Healthcare		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="366.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 98
	<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)
GE HealthCare Technologies Inc. PAC

A. O'Keef, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Treasurer, GE Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 1A219CE036E4461A81C3
 Amount of Each Receipt this Period 2250.00
 Memo Item

B. Olsen, Scott, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Plant Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 25CE45AD6337491786C5
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Olsen, Scott, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Plant Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 234938D0F95C4195BE17
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2366.00
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 66 OF 98		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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)
GE HealthCare Technologies Inc. PAC

A. Pauls, Kerry, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive HR - US People Experience
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 6E194585E8074215B683
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Pauls, Kerry, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive HR - US People Experience
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 2E7455CD64324DC780B1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Polzin, Jason, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, MR Applications Platform and Rese
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : F886C8DA883D409EB4FF
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	258.00
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 67 OF 98
	<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"/>	<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)
GE HealthCare Technologies Inc. PAC

A. Polzin, Jason, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, MR Applications Platform and Res
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 9A0987506042463FA004
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Polzin, Jason, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, MR Applications Platform and Res
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 951ACF17310C47EFB667
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Qualm, Jaap, Roland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Cyber Security
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 06 / 16 / 2023
Transaction ID : B1BEBBA4E24C4CFFB88C
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 68 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
GE HealthCare Technologies Inc. PAC

A. Quinn, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, International Trade and Eco
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 8E80AD4897FF4A1DBB09
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Quinn, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, International Trade and Eco
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 194510C62D6849298425
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Quinn, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, International Trade and Eco
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : DB7EF35FF40F461AB684
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	174.00
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:	PAGE 69 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Rameswamy, Nagaraajan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP - Software Engineering, Edison Ente
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 06 / 16 / 2023
Transaction ID : F00CE41E23A847CFBDB0
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Rapp, James, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President, Interventional, IMG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 16 / 2023
Transaction ID : A153B47BC3F9412C84EE
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Retzlaff, Heidi, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Labor & Employment Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 8F468EEFD35C40FD8FC7
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 70 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Retzlaff, Heidi, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Labor & Employment Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 934B57227C8146B2B6A9
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Retzlaff, Heidi, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Global Labor & Employment Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 06 / 16 / 2023
Transaction ID : F935204F4615473E9D90
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Robbins, George, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean Leader Imaging
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 760CAFE4AFDC4D3FA35D
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 71 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Rowland, Chad, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global Premium CT & Photon Cou
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : D79520C0047543BB855B
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Rowland, Chad, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global Premium CT & Photon Cou
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 64E61AEF5BC44F81A10F
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Rowland, Chad, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global Premium CT & Photon Cour
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 8BA8D9C9665B4882BB8D
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
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 72 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Schaeffler, John, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Director - Government Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1864.00

Date of Receipt
 03 / 24 / 2023
Transaction ID : 7E580755129D4AAD936F
 Amount of Each Receipt this Period
 416.00
 Memo Item

B. Schaeffler, John, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Director - Government Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1864.00

Date of Receipt
 04 / 21 / 2023
Transaction ID : 5FFBC59899974A5AAC25
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Schaeffler, John, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Director - Government Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1864.00

Date of Receipt
 05 / 19 / 2023
Transaction ID : 11B8BDDDB48AE499C88B4
 Amount of Each Receipt this Period
 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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:	PAGE 73 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Schaeffler, John, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Director - Government Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1864.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 438CC31C43C7428B9E3C
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Schmeling, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1098.00

Date of Receipt **02 / 24 / 2023**
Transaction ID : 1FB049C380664DEFFB949
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Schmeling, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1098.00

Date of Receipt **03 / 24 / 2023**
Transaction ID : 9CA1FB4BDAAB42B79174
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	832.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 74 OF 98
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Schmeling, John, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 West Monroe Street
City Chicago State IL Zip Code 60661
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1098.00

Date of Receipt 04 / 21 / 2023
Transaction ID : D1093B11A65C49499A6C
Amount of Each Receipt this Period 208.00
Memo Item

B. Schmeling, John, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 West Monroe Street
City Chicago State IL Zip Code 60661
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1098.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 1413A61CDCE443498A21
Amount of Each Receipt this Period 208.00
Memo Item

C. Schmeling, John, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 West Monroe Street
City Chicago State IL Zip Code 60661
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1098.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 0041035112DF4A4F9139
Amount of Each Receipt this Period 208.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 624.00
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:	PAGE 75 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Senn, Mara, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Global Compliance Lead - Inv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 629EA3702B544716964D
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Sikorski, Anthony, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) MR Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 699.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 91C559C9A0B44AC4B7C1
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Sikorski, Anthony, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) MR Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 699.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 0EF9F936CF9E43B3B131
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	682.00
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 76 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Sjoberg, Thomas, Edmund, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Category Sourcing Executive - Mechani
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 05 / 19 / 2023
Transaction ID : A019C8348E9B4A0B86A0
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Sjoberg, Thomas, Edmund, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Category Sourcing Executive - Mechan
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 06 / 16 / 2023
Transaction ID : BB2F277B987048968978
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Slupecki, Andrew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global Logistics & Distribution
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 860F55429B0247FD8C2B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	166.00
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 77 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Slupecki, Andrew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Global Logistics & Distribution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 752284498A714C1684D8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Stacherski, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 02 / 24 / 2023
Transaction ID : F51902EA7C9B442A8451
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Stacherski, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 03 / 24 / 2023
Transaction ID : C12104AF5E5643F18D8A
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	882.00
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 78 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Stacherski, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 04 / 21 / 2023
Transaction ID : A61C103A4C2144B79F44
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Stacherski, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 56875D7B01B4498B8D6D
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Stacherski, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 06 / 16 / 2023
Transaction ID : B9D8E30F75F144EDB31D
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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 79 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Stoddard, Scott, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Market Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 050D140B57E9437E880D
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Sullivan, Lisa, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Patient Care Solutions Qual
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt 04 / 21 / 2023
Transaction ID : EBD9FD3BA35248B59931
 Amount of Each Receipt this Period 116.00
 Memo Item

C. Sullivan, Lisa, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Patient Care Solutions Qual
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 8D67C01CF8E74F40B0D8
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	232.00
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:	PAGE 80 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
GE HealthCare Technologies Inc. PAC

A. Terry, Jeffrey, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) CEO, Command Centers
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 74E943BDD17C4B02B6C8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Terry, Jeffrey, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) CEO, Command Centers
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 6478FFFF495747F790FE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Uhl, Carrie, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Procurement Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 24 / 2023
Transaction ID : 26777501D3B848CC9916
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 81 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uhl, Carrie, Renee, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Chief Procurement Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2023

Transaction ID : 89A50D394A914317B832

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uhl, Carrie, Renee, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Chief Procurement Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2023

Transaction ID : 9E4EA29689AE430BA129

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uhl, Carrie, Renee, ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Chief Procurement Officer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2023

Transaction ID : 90B9A14D8DDF43F38D9E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 82 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Wawrzyn, Robert, Marc, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Counsel - Intellectual Prope
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 92FE2C6F0B6F455D9B50
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Wawrzyn, Robert, Marc, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Counsel - Intellectual Prope
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 19 / 2023
Transaction ID : 099252896380496EB849
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Wawrzyn, Robert, Marc, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Counsel - Intellectual Prope
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 16 / 2023
Transaction ID : 347A2C3B6BA6460A9CED
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
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:	PAGE 83 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

A. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 01 / 27 / 2023
Transaction ID : 9FAF6659F7D34A4ABC53
 Amount of Each Receipt this Period
 416.00
 Memo Item

B. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solutior
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 02 / 24 / 2023
Transaction ID : 5DB9336DC8CA4AA0A790
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solution
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 03 / 24 / 2023
Transaction ID : C4411B2282D24995B9CA
 Amount of Each Receipt this Period
 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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:	PAGE 84 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GE HealthCare Technologies Inc. PAC

A. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : 2F941F9281BD4A5DA79B
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : 3D147D4FE46F40858ACB
 Amount of Each Receipt this Period 416.00
 Memo Item

C. Westrick, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt **06 / 16 / 2023**
Transaction ID : 480B84A8C6E040349E13
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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 85 OF 98
	<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	

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)
GE HealthCare Technologies Inc. PAC

A. Wingard, Christopher, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Sr Director - Risk & Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 24 / 2023
Transaction ID : DAD67CD21B3D4F6FBF49
 Amount of Each Receipt this Period 240.00
 Memo Item

B. Wurzburger, Diane, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Regulatory and Region Qua
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 04 / 21 / 2023
Transaction ID : 8D573A4F4B7A4E14B6CB
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Wurzburger, Diane, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 West Monroe Street
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive, Regulatory and Region Quali
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 19 / 2023
Transaction ID : C1290412045C42C9BAF5
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	356.00
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: PAGE 86 OF 98
(check only one)

<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)
GE HealthCare Technologies Inc. PAC

A. Wurzburger, Diane, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Executive, Regulatory and Region Qual
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2023

Transaction ID : 8D1FA8D403944F5F8436

Amount of Each Receipt this Period
58.00

Memo Item

B. Zaman, Sabih, Qamaruz, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Director, Service Product Management
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2023

Transaction ID : 6C2A87D6FE22481A9300

Amount of Each Receipt this Period
58.00

Memo Item

C. Zaman, Sabih, Qamaruz, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Director, Service Product Management
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2023

Transaction ID : C5FC08E9A46A4BCAB807

Amount of Each Receipt this Period
58.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 87 OF 98
	<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)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2023

Transaction ID : C9874B180262435AAE12

Amount of Each Receipt this Period
416.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2023

Transaction ID : 90D57BB93165415D808C

Amount of Each Receipt this Period
416.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2023

Transaction ID : D5F5F0D8887C48948F8E

Amount of Each Receipt this Period
416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
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 88 OF 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2023
Transaction ID : 642064FF33234A43B025

Amount of Each Receipt this Period
 416.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2023
Transaction ID : 4624E4DA1CD7454E964F

Amount of Each Receipt this Period
 416.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zhang, Yihao, , ,

Mailing Address 500 West Monroe Street

City Chicago	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) President & CEO, GE Healthcare China
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2023
Transaction ID : B9EA9630B2E54191BFEE

Amount of Each Receipt this Period
 416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
TOTAL This Period (last page this line number only).....	46657.00

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)

Form grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Blake Moore For Congress

Mailing Address 358 SOUTH 700 E
B505

City SALT LAKE CITY State UT Zip Code 84102

Purpose of Disbursement 2024 Convention

011

Candidate Name Moore, Blake, D., ,

Category/ Type

Office Sought: [x] House [] Senate [] President
State: UT District: 01

Disbursement For: 2024
[] Primary [] General
[x] Other (specify) Convention

Date of Disbursement

Date of Disbursement: 05 / 11 / 2023

FEC Identification Number

C00738872

Transaction ID : BE09E1EC64

Amount of Each Disbursement this Period

1000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

B. Bob Casey For Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement 2024 Primary

011

Candidate Name Casey, Robert, P., , Jr.

Category/ Type

Office Sought: [] House [x] Senate [] President
State: PA District:

Disbursement For: 2024
[x] Primary [] General
[] Other (specify)

Date of Disbursement

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number

C00431056

Transaction ID : AE9911DBC4

Amount of Each Disbursement this Period

1000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

C. Cathy McMorris Rodgers For Congress

Mailing Address PO Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement 2024 Primary

011

Candidate Name McMorris Rodgers, Cathy, , ,

Category/ Type

Office Sought: [x] House [] Senate [] President
State: WA District: 05

Disbursement For: 2024
[x] Primary [] General
[] Other (specify)

Date of Disbursement

Date of Disbursement: 03 / 29 / 2023

FEC Identification Number

C00390476

Transaction ID : 4326C00249

Amount of Each Disbursement this Period

1000.00

[] Memo Item

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

3000.00

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

**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)
GE HealthCare Technologies Inc. PAC

A. **Davis For Congress/Friends Of Davis**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5956 W Race Ave

/ /

City Chicago State IL Zip Code 60644

FEC Identification Number

Purpose of Disbursement
2024 Primary

Category/
Type

Transaction ID : C647CFE83B
Amount of Each Disbursement this Period

Candidate Name

Davis, Danny, K., ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: IL District: 07

Memo Item

B. **Debbie Wasserman Schultz For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1071 Twin Branch Ln

/ /

City Weston State FL Zip Code 33326

FEC Identification Number

Purpose of Disbursement
2024 Primary

Category/
Type

Transaction ID : 694F3204B5C
Amount of Each Disbursement this Period

Candidate Name

Wasserman Schultz, Debbie, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: FL District: 25

Memo Item

C. **DelBene for Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 477

/ /

City Kirkland State WA Zip Code 98083

FEC Identification Number

Purpose of Disbursement
2024 Primary

Category/
Type

Transaction ID : 1D7C7CC354
Amount of Each Disbursement this Period

Candidate Name

DelBene, Suzan, Kay, ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: WA District: 01

Memo Item

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

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

**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)
GE HealthCare Technologies Inc. PAC

A. Dr John Joyce For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 09 / 2023

Mailing Address 1002 Logan Blvd
Ste 114

City Altoona State PA Zip Code 16602

Purpose of Disbursement 2024 Primary
FEC Identification Number: C00674259
Transaction ID: 17F1297FB29
Amount of Each Disbursement this Period: 1000.00

Candidate Name: **Joyce, John, , ,**
Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: PA District: 13
 Memo Item

B. Friends Of John Barrasso

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 09 / 2023

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement 2024 Primary
FEC Identification Number: C00436386
Transaction ID: 00DDDD04D3
Amount of Each Disbursement this Period: 1500.00

Candidate Name: **Barrasso, John, Anthony, ,**
Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: WY District:
 Memo Item

C. Friends Of Neal Dunn

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 26 / 2023

Mailing Address PO Box 10037

City Tallahassee State FL Zip Code 32302

Purpose of Disbursement 2024 Primary
FEC Identification Number: C00582304
Transaction ID: 6CCA6A3F05
Amount of Each Disbursement this Period: 1000.00

Candidate Name: **Dunn, Neal, Patrick, ,**
Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: FL District: 02
 Memo Item

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

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

3500.00

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)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Raja For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	26	/	2023

Mailing Address PO Box 681202

FEC Identification Number

C C00575092

Transaction ID : 5B72C018A7I

Amount of Each Disbursement this Period

1000.00

Memo Item

City Schaumburg State IL Zip Code 60168

Purpose of Disbursement
2024 Primary

011
Category/
Type

Candidate Name

Krishnamoorthi, S. Raja, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. Glenn Grothman For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2023

Mailing Address PO Box 1215

FEC Identification Number

C C00561597

Transaction ID : 146EDFC7D5I

Amount of Each Disbursement this Period

1000.00

Memo Item

City Fond Du Lac State WI Zip Code 54964-1215

Purpose of Disbursement
2024 Primary

011
Category/
Type

Candidate Name

Grothman, Glenn, S., ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: WI District: 06

Full Name (Last, First, Middle Initial)

C. Jason Smith For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2023

Mailing Address PO Box 1324

FEC Identification Number

C C00541862

Transaction ID : 3CA07C5A1C

Amount of Each Disbursement this Period

2000.00

Memo Item

City Cape Girardeau State MO Zip Code 63702-1324

Purpose of Disbursement
2024 Primary

011
Category/
Type

Candidate Name

Smith, Jason, Thomas, ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: MO District: 08

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

4000.00

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

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)

Grid for line numbers 21b-30b with checkboxes. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Kuster For Congress, Inc

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302

Purpose of Disbursement 2024 Primary

Candidate Name Kuster, Ann, McLane, ,

Office Sought: [x] House Disbursement For: 2024 [x] Primary [] General [] Other (specify)
State: NH District: 02

Date of Disbursement

Date of Disbursement: 05 / 11 / 2023

FEC Identification Number

C00462861

Transaction ID : 41A6B5A845!

Amount of Each Disbursement this Period

1000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

B. Larson For Congress

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126-1172

Purpose of Disbursement 2024 Convention

Candidate Name Larson, John, Barry, ,

Office Sought: [x] House Disbursement For: 2024 [] Primary [] General [x] Other (specify) Convention
State: CT District: 01

Date of Disbursement

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number

C00330142

Transaction ID : 727899D6FBE

Amount of Each Disbursement this Period

1000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

C. Lisa Blunt Rochester For Congress

Mailing Address PO Box 9767

City Wilmington State DE Zip Code 19809

Purpose of Disbursement 2024 Primary

Candidate Name Blunt Rochester, Lisa, , ,

Office Sought: [x] House Disbursement For: 2024 [x] Primary [] General [] Other (specify)
State: DE District: 01

Date of Disbursement

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number

C00590778

Transaction ID : 34D8F58688!

Amount of Each Disbursement this Period

2500.00

[] Memo Item

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

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

4500.00

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)
GE HealthCare Technologies Inc. PAC

A. Marsha For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024

Purpose of Disbursement 2024 Primary

Candidate Name **Blackburn, Marsha, Wedgeworth, ,**

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: TN District:

Date of Disbursement: 03 / 29 / 2023

FEC Identification Number: C00376939
Transaction ID : A86187EFF34
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

B. Michelle Steel For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 9070 Irvine Center Dr Ste 150

City Irvine State CA Zip Code 92618

Purpose of Disbursement 2024 Primary

Candidate Name **Steel, Michelle, Park, ,**

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number: C00704981
Transaction ID : CB7986B9AE
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

C. Mike Crapo For US Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement 2028 Primary

Candidate Name **Crapo, Michael, Dean, ,**

Office Sought: House Senate President

Disbursement For: 2028 Primary General Other (specify) ▼

State: ID District:

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number: C00330886
Transaction ID : 2D3AF25DAI
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

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

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

3000.00

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)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)
A. Mike Gallagher For Wisconsin

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	3

Mailing Address PO Box 1027

City Green Bay State WI Zip Code 54305

FEC Identification Number

C C00610212
Transaction ID : 85C6242066C
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement 2024 Primary

011
Category/Type

Candidate Name
Gallagher, Michael, John, ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: WI District: 08

Full Name (Last, First, Middle Initial)
B. Moore For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	2	3

Mailing Address PO Box 16646

City Milwaukee State WI Zip Code 53216

FEC Identification Number

C C00397505
Transaction ID : 248C0220AD
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement 2024 Primary

011
Category/Type

Candidate Name
Moore, Gwendolynne, Sophia, ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: WI District: 04

Full Name (Last, First, Middle Initial)
C. Moore For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	3

Mailing Address PO Box 16646

City Milwaukee State WI Zip Code 53216

FEC Identification Number

C C00397505
Transaction ID : 571FD91189I
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement 2024 Primary

011
Category/Type

Candidate Name
Moore, Gwendolynne, Sophia, ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: WI District: 04

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

3000.00

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

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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)
GE HealthCare Technologies Inc. PAC

A. Pallone For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
2024 Primary

Candidate Name
Pallone, Frank, , , Jr.

Office Sought: House Senate President
State: NJ District: 06

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number: **C00226928**
Transaction ID : **E6D317AED9**
Amount of Each Disbursement this Period: 1500.00

Memo Item

B. Richard E Neal For Congress Committee

Full Name (Last, First, Middle Initial)
Mailing Address 76 Magnolia Ter

City Springfield State MA Zip Code 01108

Purpose of Disbursement
2024 Primary

Candidate Name
Neal, Richard, Edmund, ,

Office Sought: House Senate President
State: MA District: 01

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 06 / 09 / 2023

FEC Identification Number: **C00226522**
Transaction ID : **D998C878DAI**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Robin Kelly For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 101199

City Chicago State IL Zip Code 60610

Purpose of Disbursement
2024 Primary

Candidate Name
Kelly, Robin, Lynne, ,

Office Sought: House Senate President
State: IL District: 02

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 05 / 11 / 2023

FEC Identification Number: **C00539866**
Transaction ID : **A61172EED1**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3500.00

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

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)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Romney For Utah Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET, SUITE 401

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
2024 Convention

011
Category/ Type

FEC Identification Number

C C00670695

Transaction ID : 64629468414
Amount of Each Disbursement this Period

1000.00

Memo Item

Office Sought: House
 Senate
 President
State: UT District:

Disbursement For: 2024
 Primary General
 Other (specify)
Convention

Full Name (Last, First, Middle Initial)

B. Schneider For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	11	/	2023

Mailing Address PO Box 1318

City Deerfield State IL Zip Code 60015

Purpose of Disbursement
2024 Primary

011
Category/ Type

FEC Identification Number

C C00495952

Transaction ID : FB47D827532
Amount of Each Disbursement this Period

1000.00

Memo Item

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2024
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

C. Scott Fitzgerald For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

Mailing Address PO Box 484

City Oconomoc State WI Zip Code 53066-0484

Purpose of Disbursement
2024 Primary

011
Category/ Type

FEC Identification Number

C C00720011

Transaction ID : 93AD78EBA:
Amount of Each Disbursement this Period

1000.00

Memo Item

Office Sought: House
 Senate
 President
State: WI District: 05

Disbursement For: 2024
 Primary General
 Other (specify)
▼

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

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

3000.00

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)
GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2023

Mailing Address PO Box 696

FEC Identification Number

C C00326801

City Madison State WI Zip Code 53701

Transaction ID : 31945073330I
Amount of Each Disbursement this Period

Purpose of Disbursement
2024 Primary

011
Category/
Type

1000.00

Candidate Name
Baldwin, Tammy, S., ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: WI District:

Memo Item

Full Name (Last, First, Middle Initial)

B. Veronica Escobar For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2023

Mailing Address PO Box 3961

FEC Identification Number

C C00653923

City El Paso State TX Zip Code 79923

Transaction ID : 0F56B44272F
Amount of Each Disbursement this Period

Purpose of Disbursement
2024 Primary

011
Category/
Type

1000.00

Candidate Name
Escobar, Veronica, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: TX District: 16

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

FEC Identification Number

C

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

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

2000.00

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

33500.00