

# **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 197

(check only one)

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

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NAME OF COMMITTEE (In Full)

**McKesson Corporation Employees Political Fund**

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

A. Brown, Monika, H, ,

Mailing Address 16 Hays Town

City  
New Albany

State  
OH

Zip Code  
43054-7132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCK McKesson Corporation

Occupation (for Individual)  
SVP, Mergers & Acquisitions - 510771

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2019

Transaction ID : 201910161094-566

Amount of Each Receipt this Period

104.16

☐ Memo Item

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

B. Brown, Monika, H, ,

Mailing Address 16 Hays Town

City  
New Albany

State  
OH

Zip Code  
43054-7132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCK McKesson Corporation

Occupation (for Individual)  
SVP, Mergers & Acquisitions - 510771

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : 20191012214-595

Amount of Each Receipt this Period

104.16

☐ Memo Item

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

C. Bruno, Christopher, John, ,

Mailing Address 1 Post St

City  
San Francisco

State  
CA

Zip Code  
94104-5201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCK McKesson Corporation

Occupation (for Individual)  
NON-EVALUATED PEOPLE LEADER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2019

Transaction ID : 201910161094-106

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

220.82

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