

# **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 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

Molina Healthcare, Inc. PAC

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

A. Simkins, Deborah, , ,

Mailing Address 4715 E. Shaw Street

City  
Long BeachState  
CAZip Code  
90803-1724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Molina Healthcare, Inc.Occupation (for Individual)  
VP, Office of CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2019

Transaction ID : PR477370320348

Amount of Each Receipt this Period

384.00

☐ Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

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

B. Lockwood, Tonya, , ,

Mailing Address 520 S Kenwood

City  
Royal OakState  
MIZip Code  
48067-3995FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Molina Healthcare of MIOccupation (for Individual)  
VP, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2019

Transaction ID : PR477371820348

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. Quinones, Ernest, E, ,

Mailing Address 4314 N Greenbrier Rd

City  
Long BeachState  
CAZip Code  
90808-1417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Molina Healthcare, Inc.Occupation (for Individual)  
VP, Core Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2019

Transaction ID : PR477376720348

Amount of Each Receipt this Period

384.60

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

968.60

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