

# **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)

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

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NAME OF COMMITTEE (In Full)

**340B HEALTH POLITICAL ACTION COMMITTEE (340B HEALTH PAC)**

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

**A. Limberis, Paul, , ,**

Mailing Address 13199 E. Montview Boulevard  
#100

City  
Aurora

State  
CO

Zip Code  
80045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Colorado

Occupation (for Individual)  
Pharmacy Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2019

Transaction ID : SA11AI.4975

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. Maurice, Timothy, , ,**

Mailing Address 2315 Stockton Boulevard  
Room 0762

City

Sacramento

State  
CA

Zip Code  
95817

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Univ. of Cal. Davis Med. Ctr.

Occupation (for Individual)  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2019

Transaction ID : SA11AI.4977

Amount of Each Receipt this Period

800.00

☐ Memo Item

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

**C. Petersen, Steve, , ,**

Mailing Address 3900 W. Avera Drive

City

Sioux Falls

State  
SD

Zip Code  
57108-5721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Avera Health

Occupation (for Individual)  
Vice President, Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2019

Transaction ID : SA11AI.4982

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2300.00