

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 56

(check only one)

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

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NAME OF COMMITTEE (In Full)

Philips North America LLC Political Action Committee

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

A. Hartnett, Jeffrey, , ,

Mailing Address 6845 Crofton St

City
Alpharetta

State
GA

Zip Code
30005-2292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips Health Systems

Occupation (for Individual)
Director, Technical Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

12 / 31 / 2019

Transaction ID : PR2563398868299

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

B. Shafor, Randy, , ,

Mailing Address 183 Lake Park Drive

City
Sharpsburg

State
GA

Zip Code
30277-2169

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips Medical Systems

Occupation (for Individual)
Account Manager, Connected Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2019

Transaction ID : PR2563428968299

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$10.00 Bi-Weekly)

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

C. Cocco, David, , ,

Mailing Address 11145 Cypress Leaf Drive

City
Orlando

State
FL

Zip Code
32825-5856

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips North America

Occupation (for Individual)
Sr Procurement Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

12 / 31 / 2019

Transaction ID : PR2563462368299

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

170.00