

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 32

(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 Beach

State
CA

Zip Code
90803-1724

FEC 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 ▼

384.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : PR477370322159

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 1110 Butternut Ave

City
Royal Oak

State
MI

Zip Code
48073-3280

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Molina Healthcare of MI

Occupation (for Individual)
VP, Health Plan Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : PR477371822159

Amount of Each Receipt this Period

384.60

☐ Memo Item

P/R Deduction (\$192.30 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 Beach

State
CA

Zip Code
90808-1417

FEC 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 ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : PR477376722159

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

1153.20

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