

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 1131

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)**

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

**A. Mischel, Brian, , ,**

Mailing Address 1 Express Way

City  
Saint LouisState  
MOZip Code  
63121-1824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Express Scripts Services CoOccupation (for Individual)  
Director - Clinical Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

**Transaction ID : 2019121716375-379**

Amount of Each Receipt this Period

8.00

☐ Memo Item

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

**B. Mohanty, Monalisa, , ,**

Mailing Address 1640 Century Center Pkwy

City  
MemphisState  
TNZip Code  
38134-8822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Express Scripts Sales Operations, Inc.Occupation (for Individual)  
Sr Dir - Clinical Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2019

**Transaction ID : 2019071715176-102**

Amount of Each Receipt this Period

57.70

☐ Memo Item

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

**C. Mohanty, Monalisa, , ,**

Mailing Address 1640 Century Center Pkwy

City  
MemphisState  
TNZip Code  
38134-8822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Express Scripts Sales Operations, Inc.Occupation (for Individual)  
Sr Dir - Clinical Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2019

**Transaction ID : 201907299455-79**

Amount of Each Receipt this Period

57.70

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

123.40

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