

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

FOR LINE NUMBER: PAGE 682 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			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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. 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
08	09	2019

Transaction ID : 2019080712535-17

Amount of Each Receipt this Period

57.70

☐ 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
08	16	2019

Transaction ID : 2019081315917-31

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
08	30	2019

Transaction ID : 2019082811295-115

Amount of Each Receipt this Period

57.70

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

173.10

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