

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

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

FOR LINE NUMBER: PAGE 274 OF 626

(check only one)

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

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

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

A. Johnson, Travis, B., ,

Mailing Address 3817 NW Expressway

City
Oklahoma City

State
OK

Zip Code
73112-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Service Corporation

Occupation (for Individual)
Sr Dir Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 26 / 2018

Transaction ID : FD33584746DA4317893C

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Jones, Daniel, , ,

Mailing Address 1001 Pennsylvania Ave NW

City
Washington

State
DC

Zip Code
20004-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HCSC

Occupation (for Individual)
VP Govt Relations & Represent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

10 / 01 / 2018

Transaction ID : 3D565D354FCB4073B91F

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

C. Jones, Daniel, , ,

Mailing Address 1001 Pennsylvania Ave NW

City
Washington

State
DC

Zip Code
20004-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HCSC

Occupation (for Individual)
VP Govt Relations & Represent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

10 / 12 / 2018

Transaction ID : 140D462A4D034CCC8823

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

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

260.00