

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

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

FOR LINE NUMBER: PAGE 347 OF 444

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Humana Inc. Political Action Committee**

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

**A. Shore, Jennifer, Rose, ,**

Mailing Address 3408 Naples Way

City  
Sellersburg

State  
IN

Zip Code  
47172-8407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Humana, Inc.

Occupation (for Individual)  
Director, Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2019

**Transaction ID : 201912181214-727**

Amount of Each Receipt this Period

13.47

☐ Memo Item

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

**B. Shore, Jennifer, Rose, ,**

Mailing Address 3408 Naples Way

City  
Sellersburg

State  
IN

Zip Code  
47172-8407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Humana, Inc.

Occupation (for Individual)  
Director, Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2019

**Transaction ID : 2019123112335-726**

Amount of Each Receipt this Period

13.47

☐ Memo Item

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

**C. Shrank, William, , ,**

Mailing Address 4801 Langdrum Ln

City  
Chevy Chase

State  
MD

Zip Code  
20815-5412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Humana, Inc.

Occupation (for Individual)  
Chief Medical and Corporate Affairs Of

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2019

**Transaction ID : 201912181214-1082**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

219.24