

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

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

FOR LINE NUMBER: PAGE 348 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. 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 Y
12 / 27 / 2019

Transaction ID : 2019123112335-1075

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Shuck, Cynthia, M, ,

Mailing Address 11204 Rannoch Ln

City
Louisville

State
KY

Zip Code
40243-1238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Humana, Inc.

Occupation (for Individual)

Clinical Pharmacy Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

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

Transaction ID : 201912181214-677

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

C. Shuck, Cynthia, M, ,

Mailing Address 11204 Rannoch Ln

City
Louisville

State
KY

Zip Code
40243-1238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Humana, Inc.

Occupation (for Individual)

Clinical Pharmacy Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

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

Transaction ID : 2019123112335-673

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

214.30

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