

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

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

FOR LINE NUMBER: PAGE 409 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. Whaley, Carla, R., ,

Mailing Address 493 Jackson Rd

City
New Castle

State
KY

Zip Code
40050-6734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humana, Inc.

Occupation (for Individual)
Associate VP, Group Medicare Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.59

Date of Receipt

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

Transaction ID : 2019123112335-962

Amount of Each Receipt this Period

36.26

☐ Memo Item

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

B. Wheatley, Michael, J., ,

Mailing Address 277 Cedar Point Ct

City
Mount Washington

State
KY

Zip Code
40047-7285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humana, Inc.

Occupation (for Individual)
Associate VP, Software Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID : 201912181214-759

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Wheatley, Michael, J., ,

Mailing Address 277 Cedar Point Ct

City
Mount Washington

State
KY

Zip Code
40047-7285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humana, Inc.

Occupation (for Individual)
Associate VP, Software Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID : 2019123112335-774

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

66.26