

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

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

FOR LINE NUMBER: PAGE 89 OF 124

(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. Shive, Bridget, L, ,**

Mailing Address 321 W Main St

City  
Louisville

State  
KY

Zip Code  
40202-4283

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Humana, Inc.

Occupation (for Individual)  
Director, Payroll

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : 2020041716135-920

Amount of Each Receipt this Period

38.50

☐ Memo Item

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

**B. Shrank, William, , ,**

Mailing Address 500 W Main St

City  
Louisville

State  
KY

Zip Code  
40202-2946

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 ▼

1538.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : 2020040613336-1040

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

Mailing Address 500 W Main St

City  
Louisville

State  
KY

Zip Code  
40202-2946

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 ▼

1538.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : 2020041716135-1028

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)..... ►

423.10