

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Charter Communications Inc. Political Action Committee

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

A. Bohigian, Catherine, , ,Mailing Address 601 Massachusetts Ave NW
Ste 400WCity
WashingtonState
DCZip Code
20001-5369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CharterOccupation (for Individual)
EVP, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2498.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	14	2018

Transaction ID : 201806158215-240

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Bohigian, Catherine, , ,Mailing Address 601 Massachusetts Ave NW
Ste 400WCity
WashingtonState
DCZip Code
20001-5369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CharterOccupation (for Individual)
EVP, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2498.40

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	28	2018

Transaction ID : 201806298136-242

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Boler, Rocky, , ,

Mailing Address 400 Atlantic St

City
StamfordState
CTZip Code
06901-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CharterOccupation (for Individual)
SVP, Customer Ops Shared Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	07	2018

Transaction ID : 201806088214-49

Amount of Each Receipt this Period

120.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

504.60

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