

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Anthem, Inc. Political Action Committee (Anthem PAC)**

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

**A. Alcoke, Susan, , ,**

Mailing Address 9924 McCauly Woods Dr

City  
Cincinnati

State  
OH

Zip Code  
45241-1489

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Anthem Companies, Inc.

Occupation (for Individual)  
Mgr II Membership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2019

**Transaction ID : 072519-89**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Alessi, Judith, , ,**

Mailing Address 51 Patrick Ln

City  
Branford

State  
CT

Zip Code  
06405-6136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Anthem Companies, Inc.

Occupation (for Individual)  
Director & Actuary III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
07 / 12 / 2019

**Transaction ID : 071519-219**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Alessi, Judith, , ,**

Mailing Address 51 Patrick Ln

City  
Branford

State  
CT

Zip Code  
06405-6136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Anthem Companies, Inc.

Occupation (for Individual)  
Director & Actuary III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2019

**Transaction ID : 072519-218**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00