

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 865 OF 1161

(check only one)

<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. Rodriguez, Katherine, , ,

Mailing Address 13736 Riverport Dr

City
Maryland HeightsState
MOZip Code
63043-4834FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Charter

Occupation (for Individual)

VP, Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2019

Transaction ID : 201910188495-1033

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Rodriguez, Katherine, , ,

Mailing Address 13736 Riverport Dr

City
Maryland HeightsState
MOZip Code
63043-4834FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Charter

Occupation (for Individual)

VP, Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2019

Transaction ID : 20191018134-925

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Rodriguez, Michela, , ,

Mailing Address 13022 Hollenberg Dr

City
BridgetonState
MOZip Code
63044-2409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Charter

Occupation (for Individual)

Mgr, Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2019

Transaction ID : 201910119416-439

Amount of Each Receipt this Period

10.00

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

110.00

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