

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

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

FOR LINE NUMBER: PAGE 32 OF 236

(check only one)

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

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NAME OF COMMITTEE (In Full)

**CVS Health PAC**

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

**A. Carlson, Martha, , ,**

Mailing Address 11 Stanwix St

City  
Pittsburgh

State  
PA

Zip Code  
15222-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CVS Health

Occupation (for Individual)  
VP, ChiefNtwk&OpsLdr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2019

**Transaction ID : 2019082915575-68**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**B. Casey, David, , ,**

Mailing Address 1 Cvs Dr

City  
Woonsocket

State  
RI

Zip Code  
02895-6146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CVS Health

Occupation (for Individual)  
VP, Diversity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2019

**Transaction ID : 201908129535-479**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Casey, David, , ,**

Mailing Address 1 Cvs Dr

City  
Woonsocket

State  
RI

Zip Code  
02895-6146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CVS Health

Occupation (for Individual)  
VP, Diversity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

**Transaction ID : 2019082915335-484**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

408.33