

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

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

FOR LINE NUMBER: PAGE 96 OF 324

(check only one)

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

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NAME OF COMMITTEE (In Full)

Anheuser-Busch Companies Inc. Political Action Committee

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

A. Fagan, John, C., ,

Mailing Address 59 Georgetown Cir

City  
O Fallon

State  
MO

Zip Code  
63368-8549

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANHEUSER-BUSCH, LLC

Occupation (for Individual)  
SME I, TECH.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2019

Transaction ID : 20191130\_634

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Fagan, Patrick, G., ,

Mailing Address 7111 Virga Ct

City  
Timnath

State  
CO

Zip Code  
80547-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANHEUSER-BUSCH, LLC

Occupation (for Individual)  
SR. BREWMASTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2019

Transaction ID : 20191115\_1193

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Fagan, Patrick, G., ,

Mailing Address 7111 Virga Ct

City  
Timnath

State  
CO

Zip Code  
80547-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANHEUSER-BUSCH, LLC

Occupation (for Individual)  
SR. BREWMASTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2019

Transaction ID : 20191130\_1194

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

40.00

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