

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

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

FOR LINE NUMBER: PAGE 21 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

Philips North America LLC Political Action Committee

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

A. Hartnett, Jeffrey, , ,

Mailing Address 6845 Crofton St

City
Alpharetta

State
GA

Zip Code
30005-2292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips Health Systems

Occupation (for Individual)
Director, Technical Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2020

Transaction ID : PR2563398870791

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

B. Cocco, David, , ,

Mailing Address 11145 Cypress Leaf Drive

City
Orlando

State
FL

Zip Code
32825-5856

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips North America

Occupation (for Individual)
Sr Procurement Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2020

Transaction ID : PR2563462370791

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

C. Schlanger, John, , ,

Mailing Address 1700 S Ocean Blvd

City
Pompano Beach

State
FL

Zip Code
33062-7819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philips North America

Occupation (for Individual)
Head of Service Parts Supply Chain (SF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2020

Transaction ID : PR2563470470791

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

375.00