

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)

PAGE 19 OF 301

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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. Beinkampen, Cynthia, , ,

Mailing Address 4304 Pleasant Glen Dr

City
Louisville

State
KY

Zip Code
40299-7012

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
Dir II Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : 041819-207

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Benintendi, Laurie, , ,

Mailing Address 4801 Beechwood Farms Dr

City
Cincinnati

State
OH

Zip Code
45244-1279

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
Vp & Counsel Csbd/Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : 040519-66

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Benintendi, Laurie, , ,

Mailing Address 4801 Beechwood Farms Dr

City
Cincinnati

State
OH

Zip Code
45244-1279

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
Vp & Counsel Csbd/Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : 041819-66

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)..... ►

230.00