

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)

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

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NAME OF COMMITTEE (In Full)

Centene Corporation Political Action Committee (Centene PAC)

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

A. Luttschwager, Leon, J, ,

Mailing Address 15 Regatta Bay Court

City

Lake St Louis

State

MO

Zip Code

63367

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Vice President Information Technolo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3085.59

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2019

Transaction ID : A2019-2954208

Amount of Each Receipt this Period

130.10

☐ Memo Item

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

B. Lynn, Debra, , ,

Mailing Address 4621 Shelbyville Road

City

Indianapolis

State

IN

Zip Code

46237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Manager Claims Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2019

Transaction ID : A2019-2701149

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Lynn, Debra, , ,

Mailing Address 4621 Shelbyville Road

City

Indianapolis

State

IN

Zip Code

46237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Manager Claims Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID : A2019-2702329

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

150.10