

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

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

FOR LINE NUMBER: PAGE 672 OF 1574

(check only one)

☒ 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)

**Health Care Service Corporation Employees' Political Action Committee**

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

A. Johnson, Travis, B., ,

Mailing Address 3817 NW Expressway

City

Oklahoma City

State

OK

Zip Code

73112-1489

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Health Care Service Corporation

Occupation (for Individual)

Sr Dir Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2017

Transaction ID : 3332C3CA7809497A94A2

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Johnson, Travis, B., ,

Mailing Address 3817 NW Expressway

City

Oklahoma City

State

OK

Zip Code

73112-1489

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Health Care Service Corporation

Occupation (for Individual)

Sr Dir Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2017

Transaction ID : 129CA46A4FE141DEB547

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Johnson, Travis, B., ,

Mailing Address 3817 NW Expressway

City

Oklahoma City

State

OK

Zip Code

73112-1489

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Health Care Service Corporation

Occupation (for Individual)

Sr Dir Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2017

Transaction ID : 0216F0BDF91E46BCB9D7

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

90.00

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