

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)

Anthem, Inc. Political Action Committee (Anthem PAC)

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

A. Esquivel, Martin, , ,

Mailing Address 27823 Coldsprings Pl

City
Valencia

State
CA

Zip Code
91354-1463

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Anthem Companies, Inc.

Occupation (for Individual)

Vp Medicare Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2020

Transaction ID : 051820-1181

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Esquivel, Martin, , ,

Mailing Address 27823 Coldsprings Pl

City
Valencia

State
CA

Zip Code
91354-1463

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Anthem Companies, Inc.

Occupation (for Individual)

Vp Medicare Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2020

Transaction ID : 060220-1172

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Evers, Cheryl, , ,

Mailing Address 5555 Boomer Rd

City
Cincinnati

State
OH

Zip Code
45247-7922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Anthem Companies, Inc.

Occupation (for Individual)

Dir Contracts Admin Unit

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
05 / 29 / 2020

Transaction ID : 060220-48

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

220.00