

# **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)

**Highmark PAC of Highmark Inc.**

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

**A. Ross, Nancy, A, ,**

Mailing Address 501 Penn Ave

City  
Pittsburgh

State  
PA

Zip Code  
15222-3208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Highmark Inc

Occupation (for Individual)  
Partner Plan Client Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2019

**Transaction ID : 201905154335-319**

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

**B. Ross, Nancy, A, ,**

Mailing Address 501 Penn Ave

City  
Pittsburgh

State  
PA

Zip Code  
15222-3208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Highmark Inc

Occupation (for Individual)  
Partner Plan Client Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2019

**Transaction ID : 201905290294-317**

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

**C. Royer, Robert, , ,**

Mailing Address 120 5th Avenue Place

City  
Pittsburgh

State  
PA

Zip Code  
15222-3099

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Highmark Inc

Occupation (for Individual)  
Dir Actuarial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.32

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2019

**Transaction ID : 201905154335-781**

Amount of Each Receipt this Period

22.12

☐ Memo Item

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

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

64.12