

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

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

FOR LINE NUMBER: PAGE 56 OF 165

(check only one)

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

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NAME OF COMMITTEE (In Full)

WALGREEN CO PAC (WalgreensPAC)

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

A. Gregory, Steven, , ,

Mailing Address 973 Bramleigh Ln

City  
Annapolis

State  
MD

Zip Code  
21401-6414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALGREEN CO

Occupation (for Individual)  
Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : A392680F15FB04335AF8

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Gremer, John, , ,

Mailing Address 11810 Willow Ridge Dr

City  
Willow Springs

State  
IL

Zip Code  
60480-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALGREEN CO

Occupation (for Individual)  
Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : A39660C94C2DD4815BB0

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Guillen Jr, Robert, , ,

Mailing Address 5789 Collier Falls Ave

City  
Las Vegas

State  
NV

Zip Code  
89139-7535

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALGREEN CO

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : A134E6579FFA8492E935

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

120.00

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