

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 138

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**AmerisourceBergen Corporation Political Action Committee (ABC PAC)**

Full Name (Last, First, Middle Initial)

**A. Michael Kody**

Mailing Address 1648 Powderhorn Drive

City

Newtown

State

PA

Zip Code

18940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AmerisourceBergen Services Corporation

Occupation

SVP - Strategy and Business Developmen

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	6

**Transaction ID : 20160323-303-18-22**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael Koerner**

Mailing Address 826 Landau Court

City

Camp Hill

State

PA

Zip Code

17011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

International Physician Networks LLC

Occupation

Consultant - Clinical Practice

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	6

**Transaction ID : 20160323-263-18-22**

Amount of Each Receipt this Period

38.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank Kokaisl**

Mailing Address 8300 Aster Lane

City

Tinley Park

State

IL

Zip Code

60477

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AmerisourceBergen Services Corporation

Occupation

VP - Health Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

**Transaction ID : 20160309-5-18-22**

Amount of Each Receipt this Period

115.38

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

346.18

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