

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

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<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)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael J. Marks

Mailing Address 300 E Randolph St

City

Chicago

State

IL

Zip Code

60601-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Care Service Corporation

Occupation

Maj/Natl Accts IL DVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Transaction ID : 46C6AC7C542A4A688B48

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Michael J. Marks

Mailing Address 300 E Randolph St

City

Chicago

State

IL

Zip Code

60601-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Care Service Corporation

Occupation

Maj/Natl Accts IL DVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Transaction ID : 6DA8B759B3AA44FFB170

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Bert E. MarshallMailing Address 1001 E Lookout Dr
Bldg B

City

Richardson

State

TX

Zip Code

75082-4144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Care Service Corporation

Occupation

President Texas Division

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Transaction ID : E7AC4A2E091641189CAB

Amount of Each Receipt this Period

192.00

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

312.00

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