

# **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. Boston, Michael, , ,**

Mailing Address 5921 Quinn Rd

City  
Frederick

State  
MD

Zip Code  
21701-6707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
National Government Services

Occupation (for Individual)  
Dir Ngs Program Mgmt Tier I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

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

**Transaction ID : 051619-487**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**B. Boston, Michael, , ,**

Mailing Address 5921 Quinn Rd

City  
Frederick

State  
MD

Zip Code  
21701-6707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
National Government Services

Occupation (for Individual)  
Dir Ngs Program Mgmt Tier I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

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

**Transaction ID : 060519-484**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**C. Bowman, Eileen, , ,**

Mailing Address 8994 Mockingbird Ln

City  
Cincinnati

State  
OH

Zip Code  
45231-4756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Anthem Companies, Inc.

Occupation (for Individual)  
Dir Strategic Vendor Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2019

**Transaction ID : 050619-118**

Amount of Each Receipt this Period

30.30

☐ Memo Item

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

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

110.30