

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

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

FOR LINE NUMBER: PAGE 23 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

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

A. Charest, Kevin, M, ,

Mailing 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 (for Individual)
Health Care Services Corporation

Occupation (for Individual)
DSVP & Chief Info Security Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

03 / 13 / 2020

Transaction ID : D7704CF678124D2C956F

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

B. Charest, Kevin, M, ,

Mailing 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 (for Individual)
Health Care Services Corporation

Occupation (for Individual)
DSVP & Chief Info Security Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

03 / 27 / 2020

Transaction ID : 62B15EFD44714D469DE1

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

c. Charlton, Christopher, Brian, ,

Mailing Address 5701 Balloon Fiesta Pkwy NE

City
Albuquerque

State
NM

Zip Code
87113-2447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Services Corporation

Occupation (for Individual)
VP & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

03 / 13 / 2020

Transaction ID : C96A002AE75247B7BD57

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

290.00

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