

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

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

FOR LINE NUMBER: PAGE 42 OF 217

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CVS Health PAC

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

A. Davenport, James, , ,

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CVS Health

Occupation (for Individual)

District Leader,Lic Fld Mgt

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : 201906181018-401

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

B. Davenport, James, , ,

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CVS Health

Occupation (for Individual)

District Leader,Lic Fld Mgt

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : 2019062515575-409

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

C. De Greve, Norman, , ,

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CVS Health

Occupation (for Individual)

SVP,Chief Marketing Officer

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : 201906181018-461

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

137.50

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