

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

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

FOR LINE NUMBER: PAGE 119 OF 716

(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)

Health Care Service Corporation Employees' Political Action Committee

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

A. Charlton, Christopher, B, ,

Mailing Address 415 E North Water St
Apt 1503

City
Chicago

State
IL

Zip Code
60611-5820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Service Corporation

Occupation (for Individual)
DSVP & Chief Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

03 / 01 / 2019

Transaction ID : 5E4C02F13C2A4938B473

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. Charlton, Christopher, B, ,

Mailing Address 415 E North Water St
Apt 1503

City
Chicago

State
IL

Zip Code
60611-5820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Service Corporation

Occupation (for Individual)
DSVP & Chief Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

03 / 15 / 2019

Transaction ID : DCBA254C570148DDBD19

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

c. Charlton, Christopher, B, ,

Mailing Address 415 E North Water St
Apt 1503

City
Chicago

State
IL

Zip Code
60611-5820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Service Corporation

Occupation (for Individual)
DSVP & Chief Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

03 / 29 / 2019

Transaction ID : B2428A406F1B43E3A791

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

180.00