

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)

PAGE 93 OF 126

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

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NAME OF COMMITTEE (In Full)

Centene Corporation Political Action Committee (Centene PAC)

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

A. Sanders, Bryan, , ,

Mailing Address 1811 2nd Ave. SW

City
Altoona

State
IA

Zip Code
50009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Vice President Long Term Care & Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2020

Transaction ID : A2020-833068

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Sanders, H Robert, , ,

Mailing Address 7 Fox Mill Drive

City
Maryville

State
IL

Zip Code
62062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Senior Vice President Human Resourc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2020

Transaction ID : A2020-831905

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Sanders, H Robert, , ,

Mailing Address 7 Fox Mill Drive

City
Maryville

State
IL

Zip Code
62062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Centene Corporation

Occupation (for Individual)

Senior Vice President Human Resourc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2020

Transaction ID : A2020-833069

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

515.00