

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

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

FOR LINE NUMBER: PAGE 49 OF 164

(check only one)

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

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NAME OF COMMITTEE (In Full)

CVS Health PAC

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

A. Finke, Daniel, , ,

Mailing Address 151 Farmington Ave
 Bldg Rogers

City
 Hartford

State
 CT

Zip Code
 06156-0001

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 CVS Health

Occupation (for Individual)
 EVP Transformtn Prod&Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : 2019052112534-467

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Finkel, Louis, , ,

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)
 VP, Government Affairs State

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 15 / 2019

Transaction ID : 2019052112575-492

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Finkel, Louis, , ,

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)
 VP, Government Affairs State

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : 2019060315511-494

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

450.00

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