

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)

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☒ 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. Burke, Claire, Catherine, ,

Mailing Address 701 E 22nd St

City
Lombard

State
IL

Zip Code
60148-5095

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Care Services Corporation

Occupation (for Individual)
VP Finance & Compliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2020

Transaction ID : EED55F21023F47D085D7

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. Burke, Donald, 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)
NA Sr Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2020

Transaction ID : 0FB27D0FB321491B8F70

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Burke, Donald, 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)
NA Sr Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2020

Transaction ID : 40D84DC439E047F7B795

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

105.00