

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

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

FOR LINE NUMBER: PAGE 16 OF 40

(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)

**HollyFrontier Corporation PAC**

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

**A. Garcia, Joseph, , ,**

Mailing Address 324 W. Elgin Street

City  
Broken Arrow

State  
OK

Zip Code  
74012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HollyFrontier Corporation

Occupation (for Individual)  
Process Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 28 / 2017

Transaction ID : SA11AI.9915

Amount of Each Receipt this Period

66.20

☐ Memo Item

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

**B. Gee, Ryan, , ,**

Mailing Address 1103 Albin Lane

City  
Cheyenne

State  
WY

Zip Code  
82009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HollyFrontier Corporation

Occupation (for Individual)  
Operations Superintendent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 28 / 2017

Transaction ID : SA11AI.9916

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Godfrey, Joshua, , ,**

Mailing Address 1005 Leslie Ct.

City  
Arlington

State  
TX

Zip Code  
76012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HollyFrontier Corporation

Occupation (for Individual)  
Sr. Mgr. General Acct.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 28 / 2017

Transaction ID : SA11AI.9918

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

126.20