

# **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)

**3M Company PAC**

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

**A. Potocnik, Joseph, Stephen, ,**

Mailing Address 3109 N. Nokomis NE

City  
Alexandria

State  
MN

Zip Code  
56308-8676

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

3M Company

Occupation (for Individual)

Lean Deployment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2019

**Transaction ID : PR304053916621**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

**B. Bennett, Jeffrey, Lee, ,**

Mailing Address 2837 Edgewater Circle

City  
Woodbury

State  
MN

Zip Code  
55125-8704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

3M Company

Occupation (for Individual)

MGR Global Payroll Program

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2019

**Transaction ID : PR304110016621**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

**C. Harms, Maureen, Anne, ,**

Mailing Address 662 SIBLEY HIGHWAY

City  
MENDOTA HTS

State  
MN

Zip Code  
55118-1805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

3M Company

Occupation (for Individual)

Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 31 / 2019

**Transaction ID : PR304113716621**

Amount of Each Receipt this Period

35.00

☐ Memo Item

P/R Deduction (\$35.00 Monthly)

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

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

85.00