

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

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

FOR LINE NUMBER: PAGE 33 OF 263

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Home Depot Inc. Political Action Committee

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

A. Britt, Elizabeth, , ,

Mailing Address 2186 Heritage Trace Dr

City
MariettaState
GAZip Code
30062-6369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Home Depot Product Authority,

Occupation (for Individual)

Mgr Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2019

Transaction ID : 20190423-6335-1-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Brixius, Jeffrey, , ,

Mailing Address 4123 Evergreen Dr

City
FairfaxState
VAZip Code
22032-1018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Home Depot U.S.A., Inc.

Occupation (for Individual)

Specialty Asm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : 20190416-2619-0-50

Amount of Each Receipt this Period

25.08

☐ Memo Item

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

C. Brown, Angela, , ,

Mailing Address 3820 Brandy Station Ct SE

City
AtlantaState
GAZip Code
30339-4404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Home Depot Product Authority,

Occupation (for Individual)

Vp Information Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

721.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2019

Transaction ID : 20190409-1192-1-38

Amount of Each Receipt this Period

80.22

☐ Memo Item

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

130.30

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