

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

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

FOR LINE NUMBER: PAGE 1059 OF 2233

(check only one)

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

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NAME OF COMMITTEE (In Full)

Truist Financial Corporation Federal PAC (formerly SunTrust Banks Inc. Political Action Committee)

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

A. Lawrence, Michael, , ,

Mailing Address 901 Semmes Avenue

City
Richmond

State
VA

Zip Code
23224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SunTrust Bank

Occupation (for Individual)

Regulatory Control Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2019

Transaction ID : A2019-2951477

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Lawrence, Michael, , ,

Mailing Address 901 Semmes Avenue

City
Richmond

State
VA

Zip Code
23224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SunTrust Bank

Occupation (for Individual)

Regulatory Control Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2019

Transaction ID : A2019-3092389

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Layman, Lynn Sherie B., B.,

Mailing Address 303 Peachtree Street

City
Atlanta

State
GA

Zip Code
30308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SunTrust Bank

Occupation (for Individual)

Ops Risk & Ctrol Conslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2019

Transaction ID : A2019-2474373

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

40.00