

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

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

FOR LINE NUMBER: PAGE 1669 OF 1836

(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. Ward, Lauren, , ,

Mailing Address 4725 Beech St SE

City
SmyrnaState
GAZip Code
30080-6923FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot Store Support, Inc.Occupation (for Individual)
Dir Operations Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1353.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : 20191217-2295-9-17

Amount of Each Receipt this Period

56.19

☐ Memo Item

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

B. Ward, Matthew, , ,

Mailing Address 3311 Greencastle Chase NE

City
MariettaState
GAZip Code
30062-4467FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot Store Support, Inc.Occupation (for Individual)
Dir Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : 20191203-5595-0-47

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

C. Ward, Matthew, , ,

Mailing Address 3311 Greencastle Chase NE

City
MariettaState
GAZip Code
30062-4467FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot Store Support, Inc.Occupation (for Individual)
Dir Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : 20191217-5560-9-17

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

80.19

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