

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

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

FOR LINE NUMBER: PAGE 1746 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. Wright, Henry, , ,

Mailing Address 1322 Oblate Dr

City
San Antonio

State
TX

Zip Code
78216-6856

FEC 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 ▼

246.82

Date of Receipt

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

Transaction ID : 20191223-5241-17-59

Amount of Each Receipt this Period

10.32

☐ Memo Item

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

B. Wright, James, , ,

Mailing Address 41 Autumn Oaks Dr

City
The Hills

State
TX

Zip Code
78738-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot Product Authority,

Occupation (for Individual)
Product Support SR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID : 20191203-5159-0-47

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Wright, James, , ,

Mailing Address 7913 Furnace Dr

City
Mc Calla

State
AL

Zip Code
35111-3064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.

Occupation (for Individual)
Reg Mgr Facilities Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID : 20191203-2088-0-47

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

35.32

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