

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

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

FOR LINE NUMBER: PAGE 47 OF 230

(check only one)

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

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NAME OF COMMITTEE (In Full)

Wells Fargo and Company Employees Good Government Federal Fund II

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

A. Hansen, Michael, E, ,

Mailing Address 420 Montgomery St

City
San Francisco

State
CA

Zip Code
94104-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WELLS FARGO BANK, N. A.

Occupation (for Individual)
Finance SR Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID : 2020010211535-2448

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Hardin, Robert, C, ,

Mailing Address 909 Fannin St

City
Houston

State
TX

Zip Code
77010-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WELLS FARGO CLEARING SERVICES, LLC

Occupation (for Individual)
Pcg Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2019

Transaction ID : 2019082612416-2768

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

c. Hardin, Robert, C, ,

Mailing Address 909 Fannin St

City
Houston

State
TX

Zip Code
77010-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WELLS FARGO CLEARING SERVICES, LLC

Occupation (for Individual)
Pcg Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2019

Transaction ID : 2019091912135-2816

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00