

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

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

FOR LINE NUMBER: PAGE 24 OF 843

(check only one)

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

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NAME OF COMMITTEE (In Full)

Walmart Inc. PAC For Responsible Government

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

A. Allen, Michael, , ,

Mailing Address 3802 SW Richsmith Rd
Apt 201

City
Bentonville

State
AR

Zip Code
72713-3052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Walmart Inc

Occupation (for Individual)

SR Assoc Counsel-Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2019

Transaction ID : 2019114000-10507

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Allen, Michael, , ,

Mailing Address 3802 SW Richsmith Rd
Apt 201

City
Bentonville

State
AR

Zip Code
72713-3052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Walmart Inc

Occupation (for Individual)

SR Assoc Counsel-Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2019

Transaction ID : 20191127000-10402

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Allen, Patricia, M, ,

Mailing Address 108 Bella Strada Cv

City
Austin

State
TX

Zip Code
78734-2791

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Walmart Inc

Occupation (for Individual)

Market H&W Director -Wm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2019

Transaction ID : 2019114000-7433

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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