

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 190

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Wells Fargo and Company Employee PAC (aka Wells Fargo Employee PAC)**

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

**A. Joyner, Joan, E, ,**Mailing Address 1525 W W T Harris Blvd  
Floor 01City  
CharlotteState  
NCZip Code  
28262-8522FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

**Transaction ID : 2020010211535-266**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Juliano, Thomas, A, ,**

Mailing Address 1 Home Campus

City

Des Moines

State

IA

Zip Code

50328-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLS FARGO BANK, N. A.Occupation (for Individual)  
Mtg Corrspondnt Reg Sales Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

**Transaction ID : 2020010211535-1339**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**C. Kadletz, Edward, M, ,**

Mailing Address 600 S 4th St

City

Minneapolis

State

MN

Zip Code

55415-1526

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLS FARGO BANK, N. A.Occupation (for Individual)  
Hd Of Deposit Products Gp (Cb)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3120.00

Date of Receipt

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

**Transaction ID : 2020010211535-114**

Amount of Each Receipt this Period

260.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

325.00

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