

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

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

FOR LINE NUMBER: PAGE 640 OF 2198

(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. Flynn, Timothy, , ,

Mailing Address 2598 W Kemper Rd

City
CincinnatiState
OHZip Code
45231-1178FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.Occupation (for Individual)
Pro Account Representative

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 / 01 / 2019

Transaction ID : 20191029-1426-0-44

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Flynn, Timothy, , ,

Mailing Address 2598 W Kemper Rd

City
CincinnatiState
OHZip Code
45231-1178FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.Occupation (for Individual)
Pro Account Representative

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 / 15 / 2019

Transaction ID : 20191112-1485-0-59

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Flynn, Timothy, , ,

Mailing Address 2598 W Kemper Rd

City
CincinnatiState
OHZip Code
45231-1178FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.Occupation (for Individual)
Pro Account Representative

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 / 29 / 2019

Transaction ID : 20191126-1553-0-32

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)..... ►