

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

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

FOR LINE NUMBER: PAGE 1684 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. Rosenstock, Michael, , ,

Mailing Address 2391 Tilden Way

City
HendersonState
NVZip Code
89074-5465FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.Occupation (for Individual)
Asst Store Mgr

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 / 08 / 2019

Transaction ID : 20191105-2521-1-23

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Rosenstock, Michael, , ,

Mailing Address 2391 Tilden Way

City
HendersonState
NVZip Code
89074-5465FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Home Depot U.S.A., Inc.Occupation (for Individual)
Asst Store Mgr

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 / 22 / 2019

Transaction ID : 20191119-2658-0-14

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Ross, Anthony, , ,

Mailing Address 46 Brookside Ave

City
SayrevilleState
NJZip Code
08872-1235FEC ID number of contributing
federal political committee.

C

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

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 : 20191029-6130-0-44

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).....▶