

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

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

FOR LINE NUMBER: PAGE 101 OF 156

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

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

**A. O'Connor, Sarah, , ,**

Mailing Address 7620 Little River Tpke

City

Annandale

State

VA

Zip Code

22003-2620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

WELLS FARGO BANK, N. A.

Occupation (for Individual)

Mtg Br Manager Np (Safe)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2017

**Transaction ID : 20171101-15-2834**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. O'Donnell, Deborah, E, ,**

Mailing Address 299 S Main St

City

Salt Lake City

State

UT

Zip Code

84111-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

WELLS FARGO BANK, N. A.

Occupation (for Individual)

Rb Region President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2017

**Transaction ID : 20171101-15-3042**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. O'Neill, David, Martin, ,**

Mailing Address 1738 Bass Rd

City

Macon

State

GA

Zip Code

31210-1043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

WELLS FARGO BANK, N. A.

Occupation (for Individual)

Equipfin National Sales Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2017

**Transaction ID : 20171101-15-3070**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00