

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 81  
(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)

Archer Daniels Midland - ADMPAC

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

**A. Ramsey, James, C, ,**

Mailing Address 645 Railroad St

City  
CypressState  
ILZip Code  
62923-2205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADMOccupation (for Individual)  
OPS SUPPORT OPTIMIZATI

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
08		15		2019

Transaction ID : 201908108497-8

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. Ramsey, James, C, ,**

Mailing Address 645 Railroad St

City  
CypressState  
ILZip Code  
62923-2205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADMOccupation (for Individual)  
OPS SUPPORT OPTIMIZATI

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
08		31		2019

Transaction ID : 201908278495-8

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. Reed, Anthony, C, ,**

Mailing Address 4000 7th St S

City  
ArlingtonState  
VAZip Code  
22204-1546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADMOccupation (for Individual)  
SR DIR GOVT. AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2019

Transaction ID : 201908108497-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

130.00

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