

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Ford Motor Company Civic Action Fund**

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

**A. GREENBERG, JEFFRY A, A, ,**

Mailing Address 1722 BENT PINE CT.

City  
ANN ARBOR

State  
MI

Zip Code  
48108-8504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
SENIOR TECHNICAL LEADER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2019

**Transaction ID : PR238853029414**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

**B. HECK, KEVIN C, C, ,**

Mailing Address 19540 ARGYLE OVAL

City  
ROCKY RIVER

State  
OH

Zip Code  
44116-1604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
PLANT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2019

**Transaction ID : PR238855229414**

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$75.00 Monthly)

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

**C. SCHILP, ROBERT J, J, ,**

Mailing Address 6815 CRESTWAY DR

City  
BLOOMFIELD HILLS

State  
MI

Zip Code  
48301-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
DEPARTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2019

**Transaction ID : PR238855429414**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

175.00