

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

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

FOR LINE NUMBER: PAGE 276 OF 806

(check only one)

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

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NAME OF COMMITTEE (In Full)

General Motors Company Political Action Committee (GM PAC)

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

A. Harris, Robert, F, ,

Mailing Address 8225 Lost Pines Dr.

City
Davisburg

State
MI

Zip Code
48350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General Motors Company

Occupation (for Individual)
Sr Consultant/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 / 2017

Transaction ID : 20170525204312-3256

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Harrison, Robert, E, ,

Mailing Address 18 Hynard Place

City
Baldwin Place

State
NY

Zip Code
10505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General Motors Company

Occupation (for Individual)
GM Professional Fellow

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 / 15 / 2017

Transaction ID : 2017051113574-1731

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Harrison, Robert, E, ,

Mailing Address 18 Hynard Place

City
Baldwin Place

State
NY

Zip Code
10505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General Motors Company

Occupation (for Individual)
GM Professional Fellow

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 / 2017

Transaction ID : 20170525204312-1951

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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