

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

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

FOR LINE NUMBER: PAGE 20 OF 24

(check only one)

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

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NAME OF COMMITTEE (In Full)

**FMC CORPORATION GOOD GOVERNMENT PROGRAM**

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

**A. Whatling, Paul, , ,**

Mailing Address 1335 Fairmont St NW

Unit 1

City  
Washington

State  
DC

Zip Code  
20009-6948

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FMC Corporation

Occupation (for Individual)

REGULATORY/REGISTRATION MGR

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  
10 / 31 / 2019

**Transaction ID : PR855783730865**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

**B. Bodey, Paula, , ,**

Mailing Address 712 Wedgewood Drive

City  
Marysville

State  
OH

Zip Code  
43040-9199

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FMC Corporation

Occupation (for Individual)

REGULATORY/REGISTRATION MGR

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  
10 / 31 / 2019

**Transaction ID : PR855784430865**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

**C. Allemang, Diane, , ,**

Mailing Address 1615 North Cleveland St

City  
Arlington

State  
VA

Zip Code  
22201-3935

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FMC Corporation

Occupation (for Individual)

VP CHIEF MARKETING OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2019

**Transaction ID : PR855784530865**

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$300.00 Monthly)

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

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

350.00