

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

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

FOR LINE NUMBER: PAGE 8 OF 27

(check only one)

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

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NAME OF COMMITTEE (In Full)

OWENS-ILLINOIS INC EMPLOYEES GOOD CITIZENSHIP FUND

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

A. Masney, Rodney, D, ,

Mailing Address 7836 N Woodbridge

City
MonclovaState
OHZip Code
43542-6700FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Owens-illinois, Inc.Occupation (for Individual)
Chief Information Officer (30200)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2019

Transaction ID : AB50D4EA3735F476DA4E

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Petrous, Michael, A, ,

Mailing Address 9216 Yorkshire Dr

City
SalineState
MIZip Code
48176-9442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Owens-illinois, Inc.Occupation (for Individual)
Supply Chain Leader BU (40736)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2019

Transaction ID : AE253C3F594A74F77809

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Kott, Mark, A, ,

Mailing Address 3689 Montevallo Ln

City
LambertvilleState
MIZip Code
48144-8625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Owens-illinois, Inc.Occupation (for Individual)
VP Portfolio & Program Mgmt (18004)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2019

Transaction ID : ADB056A4343114C028B7

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

180.00

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