

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Johnson Controls Inc. Federal PAC

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Grady L. Crosby

Signature of Treasurer Grady L. Crosby [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Johnson Controls Inc. Federal PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		61898.24
(b) Cash on Hand at Beginning of Reporting Period.....	61898.24	
(c) Total Receipts (from Line 19) .....	3252.20	3252.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	65150.44	65150.44
7. Total Disbursements (from Line 31).....	7100.00	7100.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	58050.44	58050.44
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Johnson Controls Inc. Federal PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 06 / 30 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1772.50	1772.50
(ii) Unitemized .....	1479.70	1479.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3252.20	3252.20
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3252.20	3252.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3252.20	3252.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3252.20	3252.20

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	100.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	100.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	7000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7100.00	7100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7100.00	7100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3252.20	3252.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3252.20	3252.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	100.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	100.00	100.00

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

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

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Jacqueline Ertl**

Mailing Address 3628 Turnberry Drive

City Mequon State WI Zip Code 53092

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2015  
**Transaction ID : A2015-1040243**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. Jacqueline Ertl**

Mailing Address 3628 Turnberry Drive

City Mequon State WI Zip Code 53092

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : A2015-1040250**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. Jacqueline Ertl**

Mailing Address 3628 Turnberry Drive

City Mequon State WI Zip Code 53092

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : A2015-1472069**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:  
Transaction ID:

**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)	PAGE 8 OF 21
	<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)  
**Johnson Controls Inc. Federal PAC**

**A. Jacqueline Ertl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3628 Turnberry Drive  
 City Mequon State WI Zip Code 53092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : A2015-1472076**  
 Amount of Each Receipt this Period  
 25.00

**B. Randal P. Leslie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11419 Maple Valley Dr.  
 City Plymouth State MI Zip Code 48170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Managing Director  
 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  
 06 / 30 / 2015  
**Transaction ID : A2015-1472071**  
 Amount of Each Receipt this Period  
 40.00

**C. Alex A. Molinaroli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2245 Derrin Lane  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Vice President Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2015  
**Transaction ID : A2015-364249**  
 Amount of Each Receipt this Period  
 83.35

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	148.35
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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)	PAGE 9 OF 21
<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)  
**Johnson Controls Inc. Federal PAC**

**A. Alex A. Molinaroli**  
Full Name (Last, First, Middle Initial)

Mailing Address 2245 Derrin Lane

City Brookfield State WI Zip Code 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Vice President Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.40**

Date of Receipt **02 / 27 / 2015**

**Transaction ID : A2015-364257**

Amount of Each Receipt this Period **83.35**

**B. Alex A. Molinaroli**  
Full Name (Last, First, Middle Initial)

Mailing Address 2245 Derrin Lane

City Brookfield State WI Zip Code 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Vice President Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **416.75**

Date of Receipt **03 / 13 / 2015**

**Transaction ID : A2015-603959**

Amount of Each Receipt this Period **83.35**

**C. Alex A. Molinaroli**  
Full Name (Last, First, Middle Initial)

Mailing Address 2245 Derrin Lane

City Brookfield State WI Zip Code 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Vice President Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.10**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : A2015-603967**

Amount of Each Receipt this Period **83.35**

**SUBTOTAL** of Receipts This Page (optional)..... **250.05**

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

**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)	PAGE 10 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

**A. Alex A. Molinaroli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2245 Derrin Lane  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Vice President Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.45

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : A2015-819125**  
 Amount of Each Receipt this Period  
 83.35

**B. Alex A. Molinaroli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2245 Derrin Lane  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Vice President Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 666.80

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : A2015-820244**  
 Amount of Each Receipt this Period  
 83.35

**C. Alex A. Molinaroli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2245 Derrin Lane  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation Vice President Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.15

Date of Receipt  
 05 / 15 / 2015  
**Transaction ID : A2015-1040240**  
 Amount of Each Receipt this Period  
 83.35

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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)	PAGE 11 OF 21
	<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)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial) <b>A. Alex A. Molinaroli</b>			Date of Receipt MM / DD / YYYY 05 / 29 / 2015 <b>Transaction ID : A2015-1040247</b>
Mailing Address 2245 Derrin Lane			Amount of Each Receipt this Period 83.35
City Brookfield	State WI	Zip Code 53045	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.50	
Name of Employer Johnson Controls Inc.		Occupation Vice President Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Alex A. Molinaroli</b>			Date of Receipt MM / DD / YYYY 06 / 15 / 2015 <b>Transaction ID : A2015-1472066</b>
Mailing Address 2245 Derrin Lane			Amount of Each Receipt this Period 83.35
City Brookfield	State WI	Zip Code 53045	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 916.85	
Name of Employer Johnson Controls Inc.		Occupation Vice President Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Alex A. Molinaroli</b>			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 <b>Transaction ID : A2015-1472073</b>
Mailing Address 2245 Derrin Lane			Amount of Each Receipt this Period 83.35
City Brookfield	State WI	Zip Code 53045	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.20	
Name of Employer Johnson Controls Inc.		Occupation Vice President Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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)	PAGE 12 OF 21
<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)  
**Johnson Controls Inc. Federal PAC**

**A. John P. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **03 / 13 / 2015**

**Transaction ID : A2015-603961**

Amount of Each Receipt this Period **45.00**

**B. John P. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : A2015-603969**

Amount of Each Receipt this Period **45.00**

**C. John P. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : A2015-819127**

Amount of Each Receipt this Period **45.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **135.00**

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

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

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

FOR LINE NUMBER: PAGE 13 OF 21  
(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)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. John P. Murphy**

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**04 / 30 / 2015**  
**Transaction ID : A2015-820246**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**B. John P. Murphy**

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
**05 / 15 / 2015**  
**Transaction ID : A2015-1040242**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**C. John P. Murphy**

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
**05 / 29 / 2015**  
**Transaction ID : A2015-1040249**

Amount of Each Receipt this Period  
**45.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **135.00**

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

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

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

FOR LINE NUMBER: PAGE 14 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. John P. Murphy**

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 15 / 2015**

**Transaction ID : A2015-1472068**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**B. John P. Murphy**

Mailing Address 1503 E. Bristlecove Drive

City Hartland State WI Zip Code 43029

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation VP/GM Facilities Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : A2015-1472075**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**C. David J. Novak**

Mailing Address W151 N5416 Badger Dr.

City Menomonee Falls State WI Zip Code 53051

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2015**

**Transaction ID : A2015-1040244**

Amount of Each Receipt this Period  
**21.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **111.00**

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

**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)	PAGE 15 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

**A. David J. Novak**  
Full Name (Last, First, Middle Initial)

Mailing Address W151 N5416 Badger Dr.

City Menomonee Falls State WI Zip Code 53051

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : A2015-1472064**

Amount of Each Receipt this Period  
 21.00

**B. David J. Novak**  
Full Name (Last, First, Middle Initial)

Mailing Address W151 N5416 Badger Dr.

City Menomonee Falls State WI Zip Code 53051

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : A2015-1472070**

Amount of Each Receipt this Period  
 21.00

**C. Raphael J. Shemanski**  
Full Name (Last, First, Middle Initial)

Mailing Address 9270 Cambridge Drive

City Saline State MI Zip Code 48176

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc. Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : A2015-1472065**

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Raphael J. Shemanski**

Mailing Address 9270 Cambridge Drive

City State Zip Code  
Saline MI 48176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Johnson Controls Inc. Vice President

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  
 06 / 30 / 2015  
**Transaction ID : A2015-1472072**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. Jeffrey M. Williams**

Mailing Address 11474 Maple Ridge Drive

City State Zip Code  
Plymouth MI 48170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Johnson Controls Inc. VP/General Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2015  
**Transaction ID : A2015-603960**

Amount of Each Receipt this Period  
42.00

Full Name (Last, First, Middle Initial)  
**C. Jeffrey M. Williams**

Mailing Address 11474 Maple Ridge Drive

City State Zip Code  
Plymouth MI 48170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Johnson Controls Inc. VP/General Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : A2015-603968**

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 104.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

**A. Jeffrey M. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11474 Maple Ridge Drive  
 City Plymouth State MI Zip Code 48170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation VP/General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : A2015-819126**  
 Amount of Each Receipt this Period  
 42.00

**B. Jeffrey M. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11474 Maple Ridge Drive  
 City Plymouth State MI Zip Code 48170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation VP/General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : A2015-820245**  
 Amount of Each Receipt this Period  
 42.00

**C. Jeffrey M. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11474 Maple Ridge Drive  
 City Plymouth State MI Zip Code 48170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johnson Controls Inc. Occupation VP/General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2015  
**Transaction ID : A2015-1040241**  
 Amount of Each Receipt this Period  
 42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.00  
**TOTAL** This Period (last page this line number only)..... ▶

**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)	PAGE 18 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

**A. Jeffrey M. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 11474 Maple Ridge Drive

City Plymouth	State MI	Zip Code 48170
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FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc.	Occupation VP/General Manager
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : A2015-1040248**

Amount of Each Receipt this Period  
 42.00

**B. Jeffrey M. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 11474 Maple Ridge Drive

City Plymouth	State MI	Zip Code 48170
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FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc.	Occupation VP/General Manager
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
462.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : A2015-1472067**

Amount of Each Receipt this Period  
 42.00

**C. Jeffrey M. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 11474 Maple Ridge Drive

City Plymouth	State MI	Zip Code 48170
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Controls Inc.	Occupation VP/General Manager
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
504.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : A2015-1472074**

Amount of Each Receipt this Period  
 42.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1772.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Kinzinger for Congress**

Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Adam Kinzinger**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	5

**Transaction ID : B575032**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Van Hollen for Senate**

Mailing Address 10605 Concord St. Suite 202

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution

011

Candidate Name

**Chris Van Hollen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	5

**Transaction ID : B575031**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Portman for Senate Committee**

Mailing Address 900 19th Street NW 8th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rob Portman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	5

**Transaction ID : B546720**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Welch for Congress**

Mailing Address 228 2nd Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name  
**Peter Welch**

Category/Type

Office Sought:  House  Senate  President  
State: VT District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2015

Transaction ID : B575030

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Duffy for Congress**

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement Contribution

011

Candidate Name  
**Sean Duffy**

Category/Type

Office Sought:  House  Senate  President  
State: WI District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 23 / 2015

Transaction ID : B572496

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Ron Johnson for Senate Inc.**

Mailing Address 499 South Capitol St. SW Ste 420

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name  
**Ronald Harold Johnson**

Category/Type

Office Sought:  House  Senate  President  
State: WI District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 23 / 2015

Transaction ID : B572495

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Johnson Controls Inc. Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Glenn Grothman for Congress**

Mailing Address Box 121 611 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Glenn Grothman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2015

**Transaction ID : B573709**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1000.00

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

7000.00