

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

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

FOR LINE NUMBER: PAGE 15 OF 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

Navistar Inc. Good Government Committee

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

A. Kramer, Curt, , ,

Mailing Address 2701 Navistar Drive

City  
LisleState  
ILZip Code  
60532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Navistar Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : PR82523445658

Amount of Each Receipt this Period

1800.00

☐ Memo Item

P/R Deduction (\$300.00 Monthly)

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

B. Clarke, Troy A., , ,

Mailing Address 2701 Navistar Drive

City  
LisleState  
ILZip Code  
60532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Navistar Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : PR85196045658

Amount of Each Receipt this Period

1200.00

☐ Memo Item

P/R Deduction (\$200.00 Monthly)

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

C. Mooney, Dennis, , ,

Mailing Address 2701 Navistar Drive

City  
LisleState  
ILZip Code  
60532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Navistar Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : PR85196145658

Amount of Each Receipt this Period

900.00

☐ Memo Item

P/R Deduction (\$150.00 Monthly)

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

3900.00

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