

# **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)

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

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NAME OF COMMITTEE (In Full)

**The Farm Credit Council Political Action Committee**

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

**A. Brandt, Glen, A., Mr.,**

Mailing Address 2099 County Highway 24

City  
Ada

State  
MN

Zip Code  
56510-9782

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AgCountry-Farm Credit Services, ACA, P

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2017

**Transaction ID : 40560230**

Amount of Each Receipt this Period

900.00

☐ Memo Item

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

**B. Long, Michael, A., Mr.,**

Mailing Address 9351- 72nd Street SE

City  
Berlin

State  
ND

Zip Code  
58415-8906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AgCountry-Farm Credit Services, ACA, P

Occupation (for Individual)

Director

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  
01 / 31 / 2017

**Transaction ID : 40560231**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**C. Muhs, William, A., Mr.,**

Mailing Address 10123 - 95th Street NE

City  
Langdon

State  
ND

Zip Code  
58249-9021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AgCountry-Farm Credit Services, ACA, P

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2017

**Transaction ID : 40560232**

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

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

1800.00