

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

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

FOR LINE NUMBER: PAGE 9 OF 51

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ford Motor Company Civic Action Fund

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

A. OSGOOD, JONATHAN E, , ,

Mailing Address 11245 GUYN DRIVE

City
BRIGHTONState
MIZip Code
48114-8132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORD MOTOR COMPANYOccupation (for Individual)
ASSISTANT COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : PR209297331849

Amount of Each Receipt this Period

210.00

☐ Memo Item

P/R Deduction (\$210.00 Monthly)

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

B. MELLEN, JOHN F, , ,

Mailing Address 346 MAINCENTRE

City
NORTHVILLEState
MIZip Code
48167-1564FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORD MOTOR COMPANYOccupation (for Individual)
ASSOCIATE COUNSEL

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
01 / 31 / 2020

Transaction ID : PR209302531849

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

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

C. NITTMANN, HELMUT E, , ,

Mailing Address 6819 N WEST TORCH LAKE DR

City
KEWADINState
MIZip Code
49648-9024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORD MOTOR COMPANYOccupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : PR209313531849

Amount of Each Receipt this Period

220.00

☐ Memo Item

P/R Deduction (\$220.00 Monthly)

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

680.00

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