

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 6
(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)

The J.M. Smucker Company PAC (Smucker PAC)

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

A. Madriaga, Michael, , ,

Mailing Address 1 Strawberry Lane

City
Orrville

State
OH

Zip Code
44667-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The J.M. Smucker Company

Occupation (for Individual)
Director, Federal Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : 7015752

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

B. Sabin, Julia, , ,

Mailing Address 1 Strawberry Lane

City
Orrville

State
OH

Zip Code
44667-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
J.M. Smucker Company

Occupation (for Individual)
Vice President Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : 9200605

Amount of Each Receipt this Period

576.90

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

692.28

692.28