

**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)

**Ford Motor Company Civic Action Fund**

Full Name (Last, First, Middle Initial)

**A. New Democrat Coalition PAC**

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005-2005

Purpose of Disbursement  
Direct Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 4689623**

Amount of Each Disbursement this Period

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Alliance of Automobile Manufacturers, Inc. PAC**

Mailing Address 1401 Eye Street, NW  
Suite 900

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Alliance of Automobile Manufacturers, Inc. PAC**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 4689624**

Amount of Each Disbursement this Period

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Rogers For Congress**

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Rep. Michael J. Rogers**

Office Sought:  House  
 Senate  
 President  
State: MI District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 4689625**

Amount of Each Disbursement this Period

Direct Contribution

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

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