

**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"/> 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. Drew Ferguson For Congress Inc.**

Mailing Address PO Box 387

City  
West Point

State  
GA

Zip Code  
31833

Purpose of Disbursement  
Direct Contribution

Category/  
Type

Candidate Name

**Ferguson, A. Drew, , Rep.,**

Office Sought:  House  
 Senate  
 President  
State: GA District: 03

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	28	/	2018

FEC Identification Number

**Transaction ID : 9846021**

Amount of Each Disbursement this Period

<input type="text" value="1000.00"/>
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Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Doug Lamalfa Committee**

Mailing Address 2150 River Plaza Dr., #150

City  
Sacramento

State  
CA

Zip Code  
95833

Purpose of Disbursement  
Direct Contribution

Category/  
Type

Candidate Name

**LaMalfa, Doug, , Rep.,**

Office Sought:  House  
 Senate  
 President  
State: CA District: 01

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	28	/	2018

FEC Identification Number

**Transaction ID : 9846022**

Amount of Each Disbursement this Period

<input type="text" value="1000.00"/>
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Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

Amount of Each Disbursement this Period

<input type="text"/>
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Memo Item

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

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

<input type="text" value="2000.00"/>
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<input type="text" value="133000.00"/>
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