

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 355
(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)

Monsanto Company Citizenship Fund aka Monsanto Citizenship Fund

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

A. Davis, William, R., , III

Mailing Address 7610 Davis Pond Rd

City
West PointState
VAZip Code
23181-9449FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONSANTOOccupation (for Individual)
Reg Dir of State & Local Gov Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2017

Transaction ID : 201712115285-604

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Davis, William, R., , III

Mailing Address 7610 Davis Pond Rd

City
West PointState
VAZip Code
23181-9449FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONSANTOOccupation (for Individual)
Reg Dir of State & Local Gov Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2017

Transaction ID : 201712268316-600

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. De Wilde, Annemieke, , ,

Mailing Address 10935 Janridge Ln

City
Saint LouisState
MOZip Code
63141-7701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONSANTOOccupation (for Individual)
Occupational Medicine Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2017

Transaction ID : 201712115285-549

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

105.00

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