

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 51  
(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)

**Ford Motor Company Civic Action Fund**

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

**A. LAYDEN, KEVIN E, , ,**

Mailing Address 9689 FELLOWS CREEK DR

City  
PLYMOUTHState  
MIZip Code  
48170-6395FEC 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 ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : PR209337728452**

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. WHEATLEY, BRETT A, , ,**

Mailing Address 536 WEST MAIN STREET

City  
NORTHVILLEState  
MIZip Code  
48167-1529FEC 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 ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : PR209349828452**

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

**C. COLLARENO, PHILIP A, , ,**

Mailing Address 17850 MISSION POINTE

City  
NORTHVILLEState  
MIZip Code  
48168FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : PR209370028452**

Amount of Each Receipt this Period

210.00

☐ Memo Item

P/R Deduction (\$210.00 Monthly)

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

630.00

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