

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Smith, Stuart, R, ,**

Mailing Address 16591 Brooklane Blvd.

City  
Northville

State  
MI

Zip Code  
48168-8429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FMC US

Occupation (for Individual)  
Mgr., Global Mobility Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 31 / 2017

**Transaction ID : PR240619322915**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

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

**B. Rector, Greg, A, ,**

Mailing Address 831 Lake Woods Drive

City  
Canton

State  
MI

Zip Code  
48188-3494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FMCC US

Occupation (for Individual)  
Major Accounts Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 31 / 2017

**Transaction ID : PR240622722915**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

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

**C. Thackrah, Ronald, R, Mr,**

Mailing Address 2165 Bliss Corner Street

City  
Henderson

State  
NV

Zip Code  
89044-0175

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FC China

Occupation (for Individual)  
FAFC President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 31 / 2017

**Transaction ID : PR240626722915**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

110.00