

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

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

FOR LINE NUMBER: PAGE 17 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CF Industries, Inc. Employees' Good Government Fund**

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

**A. Hopkins, David, , ,**

Mailing Address 4 Parkway N

City  
Deerfield

State  
IL

Zip Code  
60015-2542

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CF Industries

Occupation (for Individual)  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2019

**Transaction ID : F380794E9D814842B082**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Hopkins, David, , ,**

Mailing Address 4 Parkway N

City  
Deerfield

State  
IL

Zip Code  
60015-2542

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CF Industries

Occupation (for Individual)  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2019

**Transaction ID : D6A39074EBDF40058B20**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Hopkins, David, , ,**

Mailing Address 4 Parkway N

City  
Deerfield

State  
IL

Zip Code  
60015-2542

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CF Industries

Occupation (for Individual)  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2019

**Transaction ID : 8B5AB1B18B4044F8B90B**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00