

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

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

FOR LINE NUMBER: PAGE 18 OF 130

(check only one)

☒ 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. Heiser, Glen, A, ,

Mailing Address 3220 N. Prospect Road

City
YpsilantiState
MIZip Code
48198-9480FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FMC US

Occupation (for Individual)

Dept. Mgr, VHC EmisCertHomComp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR209291929810

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

B. Osgood, Jonathan, E, ,

Mailing Address 11245 Guyn Drive

City
BrightonState
MIZip Code
48114-8132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FMC US

Occupation (for Individual)

Asst. Gen Counsel, Corp Sec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR209297329810

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. King, James, G, ,

Mailing Address 6435 Saddlebridge Court

City
CummingState
GAZip Code
30040-5781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FMCC US

Occupation (for Individual)

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR209297529810

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

310.00

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