

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 6
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

R.R. Donnelley & Sons Company Good Government Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pecaric, John P, P, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2019	
Mailing Address 1507 Watkins Ln Apt 212			Transaction ID : PR167277316127	
City Naperville	State IL	Zip Code 60540	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) R.R. Donnelley & Sons Co.		Occupation (for Individual) Director	P/R Deduction (\$100.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Myland, Jeffrey R, R, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2019	
Mailing Address 427 Norway Circle			Transaction ID : PR172006116127	
City Yorkville	State IL	Zip Code 60560	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) R.R. Donnelley & Sons Co.		Occupation (for Individual) Director	P/R Deduction (\$40.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address				
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	P/R Deduction (\$40.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼		

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

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

140.00

140.00