

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

ADDRESS (number and street) One State Farm Plaza
c/o Mark Schwamberger, Treasurer,
Bloomington IL 61710-0001
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00544817 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] / [] / [] in the State of []
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on [] / [] / [] in the State of []

5. Covering Period [05] / [01] / [2020] through [05] / [31] / [2020]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Schwamberger, Mark, , ,
Type or Print Name of Treasurer

Signature of Treasurer Schwamberger, Mark, , , [Electronically Filed] Date [06] / [12] / [2020]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="199798.34"/>	<input type="text" value="199798.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="333535.22"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="27973.11"/>	<input type="text" value="257129.99"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="361508.33"/>	<input type="text" value="456928.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10270.00"/>	<input type="text" value="105690.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="351238.33"/>	<input type="text" value="351238.33"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2020 To: M M / D D / Y Y Y Y 05 / 31 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24856.96	232804.48
(ii) Unitemized	3116.15	24325.51
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27973.11	257129.99
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	27973.11	257129.99
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	27973.11	257129.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	27973.11	257129.99

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	20.00	40.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20.00	40.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	97500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	750.00	6400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	750.00	6400.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10270.00	105690.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10270.00	105690.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	27973.11	257129.99
34. Total Contribution Refunds (from Line 28(d))	750.00	6400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27223.11	250729.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20.00	40.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20.00	40.00

**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)	PAGE 6 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Arnold, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Chloe Ct
 City Bloomington State IL Zip Code 61704-8666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Ovp - Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1041.60

Date of Receipt **05 / 18 / 2020**
Transaction ID : 48459B12E879BB9602EA
 Amount of Each Receipt this Period 208.32
 Memo Item

B. Bertrand, Jeff L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Willowbend Ct
 City Bloomington State IL Zip Code 61705-4129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Enterprise Tech Exec - Arch
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 03 / 2020**
Transaction ID : EF41EA4F-AF6A-4693-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Bossch, Milt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1918 E Coconino Dr
 City Chandler State AZ Zip Code 85249-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Agency/Sales Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **05 / 16 / 2020**
Transaction ID : 4AEB9A21C9C3F5C8FFC9
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	833.32
TOTAL This Period (last page this line number only).....	

**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)	PAGE 7 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Brown, Russell, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 Panorama Dr
 City Medford State OR Zip Code 97504-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020
Transaction ID : 4571A32DA14474D3C83A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Brown, Tony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Chad Ln
 City Howell State NJ Zip Code 07731-5042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : 54223F29FDBC47E4B05C
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Bryson, Katinka M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Country Club Pl
 City Bloomington State IL Zip Code 61701-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Agency Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1041.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : 48B387216EF17C66F26A
 Amount of Each Receipt this Period
 208.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	508.32
TOTAL This Period (last page this line number only).....	

**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)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Butler, King, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Ascott Valley Dr
 City Johns Creek State GA Zip Code 30097-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 28 / 2020
Transaction ID : 477F9F4C176B5AED5B94
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Calkins, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 Vista Cir
 City Lander State WY Zip Code 82520-2922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2020
Transaction ID : 7E7845A2D382457F87E4
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Callis, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Pebblebrook Ct
 City Bloomington State IL Zip Code 61705-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 27 / 2020
Transaction ID : 47D79A8AF3C7C402F3BB
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Cegon, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2061 Wiltsey Ct SE
 City Salem State OR Zip Code 97306-6903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 11 / 2020
Transaction ID : 46F18ECC3B80756C038B
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Cimons, Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 H St
 City Alexandria State VA Zip Code 22307-1434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Leadership Development Assoc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.28

Date of Receipt 05 / 21 / 2020
Transaction ID : 4052AB45CE1B5185B8E2
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Cronin, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 286 W Coulter Rd
 City Lapeer State MI Zip Code 48446-8691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2020
Transaction ID : 403CA472F4FF2E15834E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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)	PAGE 10 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Donahue, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 Kilborn Ct
 City Bloomington State IL Zip Code 61704-7001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Enterprise Tech Exec-Financial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : 7FAE22E6-9EF0-4563-
 Amount of Each Receipt this Period
 1250.00
 Memo Item

B. Dorsett, Rayman, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2324 Lakeshore Ave Apt 5
 City Oakland State CA Zip Code 94606-1079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : 48C894225E9209250B27
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Downie, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18335 NW West Union Rd Ste J
 City Portland State OR Zip Code 97229-2199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : 2020052211135-33
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1425.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 11 OF 39
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Dubose, Lacy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12437 Meeting House Rd
 City Carmel State IN Zip Code 46032-7280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 02 / 2020
Transaction ID : 1A22902D-4DF2-4DBF-
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. Eberle, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2808 Vrooman Ct
 City Bloomington State IL Zip Code 61704-7722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Life/Health Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2020
Transaction ID : 64D83BB2-781F-4648-
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Edmonds, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18043 SW Scholls Ferry Rd
 City Beaverton State OR Zip Code 97007-8821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2020
Transaction ID : 48CBA6C5D2874B840ACC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

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)	PAGE 12 OF 39
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Fletcher, Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6509 Alderbrook Pl

City McKinney	State TX	Zip Code 75071-6884
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Enterprisetechexec-Engineering
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
483.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2020

Transaction ID : 48D281F04547ACCD8F8B

Amount of Each Receipt this Period
83.32

Memo Item

B. Ford, Dennis, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 S State St

City Jerseyville	State IL	Zip Code 62052-2359
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2020

Transaction ID : 3A32A98E-5C21-4F82-

Amount of Each Receipt this Period
1000.00

Memo Item

C. Fosen, Nannette, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2103 Foxtail Rd

City Bloomington	State IL	Zip Code 61704-1515
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Associate General Counsel
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2020

Transaction ID : 7112E24F-4CA5-47AD-

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1583.32
TOTAL This Period (last page this line number only).....	

**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)	PAGE 13 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Frati, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1934 Newmark St
 Ste B

City North Bend State OR Zip Code 97459-1274

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020
Transaction ID : 2020052211135-26

Amount of Each Receipt this Period 50.00

Memo Item

B. Gelbrich, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1594 Edgewater St NW
 Ste 170

City Salem State OR Zip Code 97304-4656

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020
Transaction ID : 2020052211135-24

Amount of Each Receipt this Period 50.00

Memo Item

C. Gibson, Janelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3735 Reiniger Rd

City Hatboro State PA Zip Code 19040-1641

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 461.50

Date of Receipt 05 / 02 / 2020
Transaction ID : 49E1A031F9F916E6022F

Amount of Each Receipt this Period 92.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 192.30

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

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)	PAGE 14 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Gourley, Corkey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39091 McKenzie Hwy
 City Springfield State OR Zip Code 97478-8603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : 4795A513C335B8C83364
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Gourley, Josh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5921 Landmark Ln
 City Eugene State OR Zip Code 97402-7570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : 44FFA36DD4FC9D6015B8
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Guilliams, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 Colt Cir
 City Bellville State OH Zip Code 44813-1290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020
Transaction ID : 4C12B74507854B262B3B
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 15 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Hacker, Kaye, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 Vrooman Ct
 City Bloomington State IL Zip Code 61704-7836
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Learning & Development
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 05 / 26 / 2020
 Transaction ID : 108218ED-602E-4BE6-
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Hagemann, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 SW Garden Home Rd
 City Portland State OR Zip Code 97223-9599
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 31 / 2020
 Transaction ID : 2020052211135-34
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Hall, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21935 E Talkid Ave
 City Parker State CO Zip Code 80138-8833
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 22 / 2020
 Transaction ID : 4C539D87EF4C1FE36DB5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 450.00
TOTAL This Period (last page this line number only).....

**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)	PAGE 16 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Hanan, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 S 47th St

City Springfield	State OR	Zip Code 97478-6625
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 31 / 2020
Transaction ID : 2020052211135-25

Amount of Each Receipt this Period
 100.00

Memo Item

B. Harman, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 Johnson Ct

City Germantown Hills	State IL	Zip Code 61548-8753
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 22 / 2020
Transaction ID : 40A2B5A2BE15112F9FEC

Amount of Each Receipt this Period
 500.00

Memo Item

C. Harris, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5295 Dark Hollow Rd

City Medford	State OR	Zip Code 97501-9627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 02 / 2020
Transaction ID : 4630B9F2A03377B5BBDE

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Higa-Seaver, Tammy, , ,

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

Mailing Address 6125 Odell St

City Cumming	State GA	Zip Code 30040-5707
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) State Farm	Occupation (for Individual) Avp - Ccc
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 44A59E6E03930C1C3478

Amount of Each Receipt this Period

Memo Item

B. Hoff, Rod, , ,

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

Mailing Address 2805 Blarney Stone Ln

City Bloomington	State IL	Zip Code 61704-8452
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) State Farm	Occupation (for Individual) Vpo - Compensation & Benefits
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 1F7D79B0-5DC0-4194-

Amount of Each Receipt this Period

Memo Item

C. Horvath, Nick, , ,

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

Mailing Address 574 Highland Dr

City Oxford	State MI	Zip Code 48371-4777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 489187FCD4651B8B7746

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1607.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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)	PAGE 18 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Horvath, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8415 Blackwood Dr
 City Windsor State CO Zip Code 80550-4699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 28 / 2020**
Transaction ID : 47C082A93088E86CB329
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Isuani, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3729 N Wilton Ave Apt 1N
 City Chicago State IL Zip Code 60613-4071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 09 / 2020**
Transaction ID : 4DF398DBA73642E735F8
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Jackson, Patty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 Legacy Crossing Dr
 City Ponte Vedra State FL Zip Code 32081-8333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **05 / 20 / 2020**
Transaction ID : B147F616-960E-4AE7-
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4050.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 19 OF 39
<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Johnson, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6035 E 17th Avenue Pkwy
 City Denver State CO Zip Code 80220-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 19 / 2020**
Transaction ID : 4C22A335BDA1F04C3687
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Karol, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Garden St
 City Garden City State NY Zip Code 11530-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 18 / 2020**
Transaction ID : 4CB4AAD3E3949A1C8E7E
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Kasten, Luke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5N226 Prairie Lakes Blvd
 City St Charles State IL Zip Code 60175-7941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 16 / 2020**
Transaction ID : 4407B041F8465C4D4EB3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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)	PAGE 20 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Kazi, Awan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18994 Bryant Rd

City Lake Oswego	State OR	Zip Code 97034-7222
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Sales Leader
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 05 / 20 / 2020
Transaction ID : 4A039E20711628FD9126

Amount of Each Receipt this Period
 125.00

Memo Item

B. Keating, Michael T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 Rose Trce

City Saratoga Spgs	State NY	Zip Code 12866-6537
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Vpo
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 05 / 14 / 2020
Transaction ID : 4DCF88E9695F3D403F1B

Amount of Each Receipt this Period
 75.00

Memo Item

C. Korgan, Malyka, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11052 Cimarron St
 Unit B

City Firestone	State CO	Zip Code 80504-6682
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 05 / 31 / 2020
Transaction ID : 2020052211135-8

Amount of Each Receipt this Period
 75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 21 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Loftus, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Tiger Lily Ln
 City Cape Eliz State ME Zip Code 04107-5107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 24 / 2020
Transaction ID : 46B087570B4CF00379FA
 Amount of Each Receipt this Period 192.30
 Memo Item

B. Lord, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 S Main St Ste 2
 City Cheboygan State MI Zip Code 49721-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020
Transaction ID : 2020052211135-21
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Lulay, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8388 Valley Way SE
 City Turner State OR Zip Code 97392-9636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2020
Transaction ID : 4E7E8FB3A00AB95582F2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	342.30
TOTAL This Period (last page this line number only).....	

**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)	PAGE 22 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Manning, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 NW Birkendene St
 City Portland State OR Zip Code 97229-8081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : 4E72A82E7E9844BBAD14
 Amount of Each Receipt this Period
 92.30
 Memo Item

B. Marshall, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6016 Garver Rd
 City Indianapolis State IN Zip Code 46208-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : 43628CC17455E8DB8120
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Melendez, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7244 W Pacific Ave
 City Lakewood State CO Zip Code 80227-2676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : 4551BCC176E6FAB494D5
 Amount of Each Receipt this Period
 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	317.30
TOTAL This Period (last page this line number only).....	

**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)	PAGE 23 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Merten-Dubensky, Barb, , ,

Mailing Address 111 Willits St
Apt 501

City Birmingham State MI Zip Code 48009-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2020
Transaction ID : 40F88B946664E82EC257

Amount of Each Receipt this Period 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Miller, Chad, , ,

Mailing Address 19378 Alianna Loop

City Bend State OR Zip Code 97702-3686

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2020
Transaction ID : 4338920158641BAD53DD

Amount of Each Receipt this Period 250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Miner, Jane Wright, , ,

Mailing Address 119 Pheasant Xing

City Glastonbury State CT Zip Code 06033-2857

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm Occupation (for Individual) Agency Administration Leader

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2020
Transaction ID : 422BAF4B9AC0AE3EC242

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 24 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Monteiro, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Redbridge Ct
 City Setauket State NY Zip Code 11733-1970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2020
Transaction ID : 43E884F7B0BAEF666ADE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Mulcahey, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 Landing Dr
 City Wylie State TX Zip Code 75098-0107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Learning Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2020
Transaction ID : B6F15E3C-84A6-4BBA-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Nadelhoffer, Gus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14800 SW 150th Ave
 City Tigard State OR Zip Code 97224-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 19 / 2020
Transaction ID : 424CB17E097A5CD87AE2
 Amount of Each Receipt this Period 41.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	341.66
TOTAL This Period (last page this line number only).....	

**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)	PAGE 25 OF 39
<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Nicholson, Larry, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 Highcrest Dr

City Medford	State OR	Zip Code 97504-9351
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 40C99CA583448C0FAA76

Amount of Each Receipt this Period

Memo Item

B. Niese, Donna, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8210 N Low Gap Rd

City Unionville	State IN	Zip Code 47468-9781
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 44BDA5C4ED1AB8E6C0AE

Amount of Each Receipt this Period

Memo Item

C. Palmer, Brett, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Strawberry Cir

City Cranberry Twp	State PA	Zip Code 16066-8206
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) State Farm	Occupation (for Individual) Vp-Agency/Sales
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 02601D5C-C978-441B-

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="883.32"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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)	PAGE 26 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Parks, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SW Sweek Dr
 City Tualatin State OR Zip Code 97062-7405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 13 / 2020
Transaction ID : 4565AE4EB384FDC10B53
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Pollock, Heidi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3764 Waterbrook Way
 City Eugene State OR Zip Code 97408-5968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2020
Transaction ID : 4C4D8483CAAD6B942420
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Prusakowski, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Volusia Ave
 City Oakwood State OH Zip Code 45409-2344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 312.50

Date of Receipt 05 / 13 / 2020
Transaction ID : 43DCA777E77443D265A0
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	262.50
TOTAL This Period (last page this line number only).....	

**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)	PAGE 27 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Rader, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Derby Way
 City Bloomington State IL Zip Code 61704-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **05 / 21 / 2020**
Transaction ID : 4FD3B838C4A08F21A0A3
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Ratzlaff, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 E Ellendale Ave Ste 1
 City Dallas State OR Zip Code 97338-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2020**
Transaction ID : 2020052211135-27
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Ray, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Pebblebrook Ct
 City Bloomington State IL Zip Code 61705-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2020**
Transaction ID : 4A37A8D3A8DD533B8055
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Rideout, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6868 W Jewell Dr
 City Lakewood State CO Zip Code 80227-2579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 05 / 28 / 2020
Transaction ID : 4FDAA3768DC4B70A56C2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Sanchez, Christina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41764 Corte Lara
 City Temecula State CA Zip Code 92592-6314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 01 / 2020
Transaction ID : 4DD988CD5714F1455E49
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Schwamberger, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2095 Mora Ave
 City Calistoga State CA Zip Code 94515-1043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 05 / 28 / 2020
Transaction ID : 5ACF9FDC78884D67B971
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 29 OF 39
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Slater, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5264 S Haleyville St
 City Aurora State CO Zip Code 80016-4273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 02 / 2020
Transaction ID : 4D9CA7B03513F48088EB
 Amount of Each Receipt this Period 41.66
 Memo Item

B. Slowikowski, Cora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3423 Ridgeway Dr SE
 City Turner State OR Zip Code 97392-9543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2020
Transaction ID : 45A19E117F89F80B4D58
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Soares De Sa, Gustavo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 3rd St Apt 5
 City Lake Oswego State OR Zip Code 97034-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2020
Transaction ID : 412296A8A5810C9D8514
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	241.66
TOTAL This Period (last page this line number only).....	

**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)	PAGE 30 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Sokol, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18587 Navajo Ln
 City Hudson State IL Zip Code 61748-7520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 19 / 2020**
Transaction ID : 919645CF-214E-4BA1-
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Taulbee, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2107 Woodbine Rd
 City Bloomington State IL Zip Code 61704-2813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.60

Date of Receipt **05 / 23 / 2020**
Transaction ID : 451BAFF0845BE1E6E91
 Amount of Each Receipt this Period 83.32
 Memo Item

C. Terry, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 Southwind Ln
 City McKinney State TX Zip Code 75070-4871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1041.60

Date of Receipt **05 / 21 / 2020**
Transaction ID : 47AEBBD26ED0E13690A2
 Amount of Each Receipt this Period 208.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2791.64
TOTAL This Period (last page this line number only).....	

**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)	PAGE 31 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Thein, Ron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9406 Crossbow Dr

City Bloomington	State IL	Zip Code 61705-8003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Vp - Financial Ops
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 05 / 18 / 2020
Transaction ID : 4F1585E39C1459A AFC36

Amount of Each Receipt this Period
 125.00

Memo Item

B. Thorp, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1099 SE Oriole St

City Grants Pass	State OR	Zip Code 97526-4000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 258.30

Date of Receipt
 05 / 04 / 2020
Transaction ID : 49A98370463E5FB9C89A

Amount of Each Receipt this Period
 41.66

Memo Item

C. Thorp, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1099 SE Oriole St

City Grants Pass	State OR	Zip Code 97526-4000
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 258.30

Date of Receipt
 05 / 15 / 2020
Transaction ID : 4947AC9D255A34689921

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.66
TOTAL This Period (last page this line number only).....	

**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)	PAGE 32 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Tingley, Tj, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11241 E Deer Path Dr
 City Robinson State IL Zip Code 62454-5336
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 13 / 2020
 Transaction ID : 41D2A55DCB0493BEDB54
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Wang, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22522 Bowens Wharf Pl
 City Ashburn State VA Zip Code 20148-6634
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1217.88

Date of Receipt 05 / 26 / 2020
 Transaction ID : 4C6F8BA6B292AB0CE8DE
 Amount of Each Receipt this Period 208.32
 Memo Item

C. Waterman, Analene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8749 Darley Rd SE
 City Aumsville State OR Zip Code 97325-9751
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 675.00

Date of Receipt 05 / 10 / 2020
 Transaction ID : 4D55936A32DD4FDDDD7FE
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 1358.32
TOTAL This Period (last page this line number only).....

**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)	PAGE 33 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Watkins, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Burgundy Ct
 City Bloomington State IL Zip Code 61704-8372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : 4904A27BB422B5725FB9
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Welch, April, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 Wadsworth Blvd Ste 103
 City Lakewood State CO Zip Code 80214-5731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : 4F9BB38A88D1EC01C992
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Wilkerson, Emory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Pointer Ridge Trl
 City Fayetteville State GA Zip Code 30214-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020
Transaction ID : 448597C249FDD908057B
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	710.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 34 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Wimmer, Russ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1082
 City Medford State OR Zip Code 97501-0079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020
Transaction ID : 423BAACB52E9625F643C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Wold, Rory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 Martin Dr
 City Medford State OR Zip Code 97501-8137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : 4F6AAACC68DB782BD383
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Zech, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5288 Donohoe Ave
 City Eugene State OR Zip Code 97402-1472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020
Transaction ID : 47839823A0CA0140BC59
 Amount of Each Receipt this Period
 41.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	191.66
TOTAL This Period (last page this line number only).....	24856.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Alaskans For Dan Sullivan

Full Name (Last, First, Middle Initial)
Mailing Address 3705 Arctic Blvd # 447
City Anchorage State AK Zip Code 99503
Purpose of Disbursement 2020 Primary
Candidate Name Sullivan, Daniel, Scott, ,
Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: AK District:

Date of Disbursement 05 / 19 / 2020
FEC Identification Number C00570994
Transaction ID : 54FE878117C
Amount of Each Disbursement this Period 1000.00
 Memo Item

B. Elise For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 500
City Glens Falls State NY Zip Code 12801
Purpose of Disbursement 2020 Primary
Candidate Name Stefanik, Elise, M., ,
Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 21

Date of Disbursement 05 / 19 / 2020
FEC Identification Number C00547893
Transaction ID : F551ECFF4E
Amount of Each Disbursement this Period 2000.00
 Memo Item

C. Loudermilk For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 447
City Cassville State GA Zip Code 30123
Purpose of Disbursement 2020 Primary
Candidate Name Loudermilk, Barry, Dean, ,
Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: GA District: 11

Date of Disbursement 05 / 26 / 2020
FEC Identification Number C00543892
Transaction ID : 4A5E232AB/
Amount of Each Disbursement this Period 1000.00
 Memo Item

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

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

4000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Perdue For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 12077

City Atlanta State GA Zip Code 30355-2077

Purpose of Disbursement
2020 General

Candidate Name
Perdue, David, Alfred, , Jr.

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District:

Date of Disbursement: 05 / 19 / 2020

FEC Identification Number: C00547570
Transaction ID : 8450720905B
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Rounds For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 250

City Pierre State SD Zip Code 57501-0250

Purpose of Disbursement
2020 Primary

Candidate Name
Rounds, M. Michael, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify)

State: SD District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C00532465
Transaction ID : A960D8C6A8
Amount of Each Disbursement this Period: 500.00

Memo Item

C. Rounds For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 250

City Pierre State SD Zip Code 57501-0250

Purpose of Disbursement
2020 General

Candidate Name
Rounds, M. Michael, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: SD District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C00532465
Transaction ID : 7A0F03DF9C
Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Steil For Wisconsin, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1818 Milton Ave
Unit 1448

City Janesville State WI Zip Code 53545-1129

Purpose of Disbursement 2020 Primary

Candidate Name Steil, Bryan, G., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: WI District: 01

Date of Disbursement 05 / 26 / 2020

FEC Identification Number C C00677286
Transaction ID : B63B5D8684
Amount of Each Disbursement this Period 1000.00

Memo Item

B. Vargas For Congress

Full Name (Last, First, Middle Initial)

Mailing Address 374 N Coast Highway 101
Ste 2

City Encinitas State CA Zip Code 92024

Purpose of Disbursement 2020 General

Candidate Name Vargas, Juan, Carlos, ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 51

Date of Disbursement 05 / 19 / 2020

FEC Identification Number C C00497321
Transaction ID : 7D9224C11F0
Amount of Each Disbursement this Period 2500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Hoenig, Phillip, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 340 Scott Farm Dr

City Powder Spgs State GA Zip Code 30127-4533

Purpose of Disbursement Refund of duplicate credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 18 / 2020

FEC Identification Number C

Transaction ID : EADBBF6E7f

Amount of Each Disbursement this Period 500.00

Memo Item

B. Myers, Jeff, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1609 Gregory St

City Normal State IL Zip Code 61761-2325

Purpose of Disbursement Refund of recurring credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 28 / 2020

FEC Identification Number C

Transaction ID : 97E86AC3C2f

Amount of Each Disbursement this Period 250.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Friends of Lily Morgan

Full Name (Last, First, Middle Initial)

Mailing Address 560 NE F Street
Suite A #314

City Grants Pass State OR Zip Code 97526

Purpose of Disbursement 2020 Primary

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 05 / 01 / 2020

FEC Identification Number C

Transaction ID : A8F59F3FBB

Amount of Each Disbursement this Period - 1000.00

Memo Item

B. Friends of Lily Morgan

Full Name (Last, First, Middle Initial)

Mailing Address 560 NE F Street
Suite A #314

City Grants Pass State OR Zip Code 97526

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 05 / 07 / 2020

FEC Identification Number C

Transaction ID : CB2FF1E3D5

Amount of Each Disbursement this Period 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	0.00