08/17/2001 15 : 05

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

NATIONWIDE POLITICAL PARTICIPATION CMTE

ADDRESS (number and street) ▼ ONE NATIONWIDE PLAZA; 1-27-06

Check if different than previously reported. (ACC)

CITY ▲ COLUMBUS STATE ▲ OH ZIPCODE ▲ 43216 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00076174

3. IS THIS REPORT X 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 Quarterly 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)	X 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 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day **P**ost -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 07 01 2001 through 07 31 2001

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CAROL DOVE, TRES.; JIM BENNEY, ASST.

Signature of Treasurer Electronically Filed by CAROL DOVE, TRES.; JIM BENNEY, ASST. Date 08 17 2001

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only			**FEC FORM 3X** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
NATIONWIDE POLITICAL PARTICIPATION CMTE

Report Covering the Period: From: 07 01 2001 To: 07 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		18485.71
(b) Cash on Hand at Begining of Reporting Period	12837.58	
(c) Total Receipts (from Line 19)	12880.29	38168.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	25717.87	56653.87
7. Total Disbursements (from Line 30)	5500.00	36436.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20217.87	20217.87
9. Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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 800-420-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Revised 1/2001)

Write or Type Committee Name

NATIONWIDE POLITICAL PARTICIPATION CMTE

Report Covering the Period: From: 07 01 2001 To: 07 31 2001

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)	150.00	
(ii) Unitemized	3730.29	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	3880.29	29168.16
(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 32, page 4) ..... ▶	3880.29	29168.16
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 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	9000.00	9000.00
17. Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	12880.29	38168.16
20. Total Federal Receipts (subtract Line 16 from Line 19) ..... ▶	12880.29	38168.16

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	0.00	36.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	36.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	5500.00	24400.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	0.00	0.00
(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)) ▶	0.00	0.00
29. Other Disbursements	0.00	12000.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	5500.00	36436.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	5500.00	36436.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	3880.29	29168.16
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3880.29	29168.16
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	36.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	0.00	36.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 11

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial): JEFFREY D ROUCH
Mailing Address: 16435 ELLIPSE TERRACE
City: BOWIE State: MD Zip Code: 20716
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 07 13 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: B0D4807S00D685L11A1

B.
Full Name (Last, First, Middle Initial): JEFFREY D ROUCH
Mailing Address: 16435 ELLIPSE TERRACE
City: BOWIE State: MD Zip Code: 20716
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 07 27 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: B0D4828S00D686L11A1

C.
Full Name (Last, First, Middle Initial): ROBERT A ROWE
Mailing Address: 2430 S.E. ROSE AVENUE
City: DES MOINES State: IA Zip Code: 50320-2235
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 07 13 2001
Amount of Each Receipt this Period: 15.00
Transaction ID: B0D4807S00D667L11A1

SUBTOTAL of Receipts This Page (optional) ..... ▶ **55.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 / 11

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial): ROBERT A ROWE
Mailing Address: 2430 S.E. ROSE AVENUE
City: DES MOINES State: IA Zip Code: 50320-2235
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 27 2001
Amount of Each Receipt this Period: 15.00
Transaction ID: B0D4828S000688L11A1

B.
Full Name (Last, First, Middle Initial): JOHN M TOWARNICKY
Mailing Address: 20 RUNDLET COURT
City: WESTERVILLE State: OH Zip Code: 43081
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 07 13 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: B0D4807S000774L11A1

C.
Full Name (Last, First, Middle Initial): JOHN M TOWARNICKY
Mailing Address: 20 RUNDLET COURT
City: WESTERVILLE State: OH Zip Code: 43081
FEC ID number of contributing federal political committee.
Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 07 27 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: B0D4828S000775L11A1

SUBTOTAL of Receipts This Page (optional) ..... ▶ **55.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 7 / 11

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial)
W C ZIMPHER

Mailing Address
2435 COVENTRY RD

City: COLUMBUS State: OH Zip Code: 43221

FEC ID number of contributing federal political committee.

Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE

Date of Receipt: 07 13 2001

Amount of Each Receipt this Period: 20.00

Receipt For: Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Transaction ID: B0D4807S00D851L11A1

B.
Full Name (Last, First, Middle Initial)
W C ZIMPHER

Mailing Address
2435 COVENTRY RD

City: COLUMBUS State: OH Zip Code: 43221

FEC ID number of contributing federal political committee.

Name of Employer: NATIONWIDE INSURANCE COMPANY
Occupation: EXECUTIVE

Date of Receipt: 07 27 2001

Amount of Each Receipt this Period: 20.00

Receipt For: Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Transaction ID: B0D4828S00D851L11A1

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **40.00**

TOTAL This Period (last page this line number only) ..... ▶ **150.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 11

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

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial)
BILL SIMON FOR GOVERNOR COMMITTEE

Mailing Address
310 SOUTH STREET

City: MORRISTOWN
State: NJ
Zip Code: 07960

FEC ID number of contributing federal political committee.

Name of Employer:
Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
9000.00

Date of Receipt
M M D D Y Y Y Y
07 31 2001

Amount of Each Receipt this Period
9000.00

2002 PRIMARY ELECTION

Transaction ID: B004846S000001L16

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**9000.00**
TOTAL This Period (last page this line number only) ..... ▶	**9000.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial)
HOBSON FOR CONGRESS COMMITTEE

Mailing Address
82 WEST COLUMBIA
City: SPRINGFIELD State: OH Zip Code: 45502

Purpose of Disbursement
2001 GENERAL/CHECK VOIDED

Category/Type: 17Z

Candidate Name
DAVE HOBSON

Office Sought: X House / Senate / President
State: OH District: 07

Disbursement For: Primary / X General / Other (specify)

Date of Disbursement: 07 / 05 / 2001

Amount of Each Disbursement this Period: -1000.00

Transaction ID: B0D4785S000001L23

B.
Full Name (Last, First, Middle Initial)
HOBSON FOR CONGRESS COMMITTEE

Mailing Address
82 WEST COLUMBIA
City: SPRINGFIELD State: OH Zip Code: 45502

Purpose of Disbursement
2002 PRIMARY ELECTION

Category/Type: 24K

Candidate Name
DAVE HOBSON

Office Sought: X House / Senate / President
State: OH District: 07

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 07 / 16 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: B0D4846S000002L23

C.
Full Name (Last, First, Middle Initial)
OXLEY FOR CONGRESS

Mailing Address
P.O. BOX 2002
City: FINDLAY State: OH Zip Code: 45835

Purpose of Disbursement
2002 GENERAL ELECTION

Category/Type: 24K

Candidate Name
MIKE OXLEY

Office Sought: X House / Senate / President
State: OH District: 04

Disbursement For: Primary / X General / Other (specify)

Date of Disbursement: 07 / 16 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: B0D4846S000003L23

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial)
VOINOVICH FOR SENATE COMMITTEE

Mailing Address
PO BOX 21030
City: ALEXANDRIA State: VA Zip Code: 22320

Purpose of Disbursement
2002 PRIMARY ELECTION

Candidate Name
GEORGE VOINOVICH

24K
Category/Type

Office Sought: House / X Senate / President
State: OH District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
07 03 2001

Amount of Each Disbursement this Period
5000.00

Transaction ID: B0D4786S000002L23

B.
Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address
P.O. BOX 1155
City: SENECA State: SC Zip Code: 29679

Purpose of Disbursement
2002 PRIMARY ELECTION

Candidate Name
LINDSEY GRAHAM

24K
Category/Type

Office Sought: House / X Senate / President
State: SC District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
07 03 2001

Amount of Each Disbursement this Period
500.00

Transaction ID: B0D4786S000001L23

C.
Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address
P.O. BOX 1155
City: SENECA State: SC Zip Code: 29679

Purpose of Disbursement
2002 PRIMARY/PRIMARY 2002

Candidate Name
LINDSEY GRAHAM

17Z
Category/Type

Office Sought: House / X Senate / President
State: SC District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
07 03 2001

Amount of Each Disbursement this Period
-500.00

Transaction ID: B0D4787S000001L23

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
NATIONWIDE POLITICAL PARTICIPATION CMTE

A.
Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address
P.O. BOX 1155
City: SENECA State: SC Zip Code: 29679

Purpose of Disbursement
2002 PRIMARY ELECTION

Candidate Name
LINDSEY GRAHAM

Category/Type: 24K

Office Sought: House / X Senate / President
State: SC District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 07 10 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: B0D4786S000002L23

B.
Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address
P.O. BOX 1155
City: SENECA State: SC Zip Code: 29679

Purpose of Disbursement
2002 PRIMARY/WRONG ADDRESS PRINTED ON CH

Candidate Name
LINDSEY GRAHAM

Category/Type: 17Z

Office Sought: House / X Senate / President
State: SC District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 07 11 2001

Amount of Each Disbursement this Period: -500.00

Transaction ID: B0D4786S000003L23

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

TOTAL This Period (last page this line number only) ..... ▶ **5500.00**