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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Ot	her Than An Aut	horized Co	mmittee		Office Use Only	
NAME OF COMMITTEE (in fu		OR PRINT ▼	Example over the	: If typing, type lines.	12FE4M	15	
MOTORISTS M	UTUAL INS	URANCE COM	IPANY CI\	/IC FUND			
ADDRESS (number and	street) 471	E BROAD ST					
Check if differ than previousl reported. (ACC	y COL	LUMBUS			ОН	43215	-
2. FEC IDENTIFICA	TION NUMBER	. ▼	TY▲		STATE ▲	ZIP C	ODE A
C C00336834			S THIS REPORT	NEW (N) OF		MENDED	
July 15	orts: Report (Q1)	Report Due On: Mai	20 (M2) r 20 (M3) r 20 (M4)	May 20 (M Jun 20 (M6 Jul 20 (M7) ary (12P)	S) Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
October 1 Quarterly January 3	Report (Q3)	Report for the:	М	rention (12C)	Special		
July 31 M Report (N Year Only	on-election) (MY)	(d) 30-Day POST-Election Report for the:	Gene	eral (30G)	Runoff (30R)	Special (30S)
(TER)		Election	on on	M / D D /	Y = Y = Y = Y	in the State	
5. Covering Period	M = M / 07	01 / 2019		rough 12	M / D D D 31	2019]
I certify that I have exa Type or Print Name of	Mod	ort and to the best of re, Marchelle, , ,	f my knowledg	e and belief it is	true, correct ar	id complete.	
Signature of Treasurer	Moore, March	nelle, , ,	[Elec	tronically Filed]	Date 01	M / 23 /	2020
NOTE: Submission of fa	se, erroneous, or	incomplete informatio	n may subject	the person signing	this Report to	the penalties of 5	2 U.S.C. § 30109
Office Use						FEC FO	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND

07 01 2019 12 31 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 42533.15 January 1, 2019 (b) Cash on Hand at 40659.30 Beginning of Reporting Period..... 18060.00 31426.25 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 73959.40 58719.30 6(a) and 6(c) for Column B)..... 5675.00 20915.10 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 53044.30 53044.30 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND

01 2019 31 2019 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 17775.00 22495.00 (i) Itemized (use Schedule A)..... 285.00 8931.25 (ii) Unitemized (iii) TOTAL (add 31426.25 18060.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 31426.25 18060.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 18060.00 31426.25 20. Total Federal Receipts 18060.00 31426.25 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
	perating Expenditures:	Iotal IIIIS Fellou	Calendar Tear-to-Date				
(8	Allocated Federal/Non-Federal Activity (from Schedule H4)						
	(i) Federal Share	0.00	0.00				
			100 40				
	(ii) Non-Federal Share	0.00	190.10				
(b	,	175.00	175.00				
(0	Expenditures c) Total Operating Expenditures	173.00	173.00				
(C	(add 21(a)(i), (a)(ii), and (b))▶	175.00	365.10				
Т	ransfers to Affiliated/Other Party	7					
С	ommittees	0.00	0.00				
	ontributions to ederal Candidates/Committees	4 4 4					
ai	nd Other Political Committees	0.00	0.00				
	dependent Expenditures						
(L	ıse Schedule E)oordinated Party Expenditures	0.00	0.00				
(5	52 U.S.C. § 30116(d))	0.00					
(L	ise Schedule F)	0.00	0.00				
1 (oan Repayments Made	0.00	0.00				
_,		4 4	0.00				
L	oans Made	0.00	0.00				
R (a	efunds of Contributions To: a) Individuals/Persons Other						
(0	Than Political Committees	0.00	0.00				
		4 4 4	4 1 4 1 4				
(b	•	0.00	0.00				
(C	'						
	(such as PACs)	0.00	0.00				
(C	•						
	(add Lines 28(a), (b), and (c))	0.00	0.00				
0	ther Disbursements (Including						
	on-Federal Donations)	5500.00	20550.00				
		4 4	4 4				
	ederal Election Activity (52 U.S.C. § 30101(2	20))					
(a	a) Allocated Federal Election Activity						
	(from Schedule H6)	0.00					
	(i) Federal Share	0.00	0.00				
	(ii) "Levin" Share	0.00	0.00				
(b		0.00	5.00				
,	Entirely With Federal Funds	0.00	0.00				
(C		7 7					
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00				
		7 7	7 7				
To	otal Disbursements (add Lines 21(c), 22,						
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	5675.00	20915.10				
_		4 4	4 4				
	otal Federal Disbursements						
	subtract Line 21(a)(ii) and Line 30(a)(ii)						
111	om Line 31)	5675.00	20725.00				

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 18060.00 31426.25 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 31426.25 18060.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 175.00 175.00 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 175.00 175.00 (subtract Line 37 from Line 36)

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

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

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	6	OF	186
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 2019 10 City Zip Code State Transaction ID: SA11AI.29330 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President MLIC Motorists Life Insurance Compa Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 07 2019 City State Zip Code Transaction ID: SA11AI.29374 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Life Insurance Compa Payroll Deduction President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Agan, Michael, J., Date of Receipt Mailing Address 5658 Tynecastle Loop 07 2019 City State Zip Code Transaction ID: SA11AI.29386 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Life Insurance Compa President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify)

120.00

SCHEDULE A (FEC Form 3X)

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

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

Use separate schedule(s) for each category of the

F	FOR LINE NUMBER:						7	OF	186
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ITEMIZED RECEIPTS Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 2019 City Zip Code State Transaction ID: SA11AI.29429 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President MLIC Motorists Life Insurance Compa Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 09 2019 City State Zip Code Transaction ID: SA11AI.29512 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Life Insurance Compa Payroll Deduction President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 720.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Agan, Michael, J., Date of Receipt Mailing Address 5658 Tynecastle Loop 18 2019 City State Zip Code Transaction ID: SA11AI.29554 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Life Insurance Compa President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General 760.00 Other (specify)

120.00

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 2019 City Zip Code State Transaction ID: SA11AI.29561 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President MLIC Motorists Life Insurance Compa Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 10 16 2019 City State Zip Code Transaction ID: SA11AI.29639 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Life Insurance Compa Payroll Deduction President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 840.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Agan, Michael, J., Date of Receipt Mailing Address 5658 Tynecastle Loop 10 30 2019 City State Zip Code Transaction ID: SA11AI.29682 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Life Insurance Compa President MLIC Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify)

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

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		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUN	D
Full Name of Individual (Last, First, Middle I Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 13 2019
Dublin	OH 43016	Transaction ID : SA11AI.29724 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For:	Occupation (for Individual) President MLIC	Memo Item Payroll Deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	
Full Name of Individual (Last, First, Middle I Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 26 2019
Dublin	OH 43016	Transaction ID : SA11AI.29766 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual) Motorists Life Insurance Compa	Occupation (for Individual) President MLIC	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	
Full Name of Individual (Last, First, Middle I Agan, Michael, J., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop	State 7ip Code	12 11 2019
City Dublin	State Zip Code 43016	Transaction ID : SA11AI.29809 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual) Motorists Life Insurance Compa	Occupation (for Individual) President MLIC	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		120.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Agan, Michael, J.,, Date of Receipt Mailing Address 5658 Tynecastle Loop 2019 City Zip Code State Transaction ID: SA11AI.29852 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President MLIC Motorists Life Insurance Compa Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1040.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ashcraft, David, , , Date of Receipt Mailing Address 1323 Ada Lane 10 2019 City State Zip Code Transaction ID: SA11AI.29312 Naperville IL 60540 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ashcraft, David, , , Date of Receipt Mailing Address 1323 Ada Lane 26 2019 City State Zip Code Transaction ID: SA11AI.29356 IL Naperville 60540 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional).....

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C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ashcraft, David, , , Date of Receipt Mailing Address 1323 Ada Lane 2019 City State Zip Code Transaction ID: SA11AI.29387 IL Naperville 60540 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ashcraft, David, , , Date of Receipt Mailing Address 1323 Ada Lane 80 2019 City State Zip Code Transaction ID: SA11AI.29430 Naperville IL 60540 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify)

	-	4	
Full Name of Individual (Last, First, Middle In Ashcraft, David, , ,	itial) or Full Orga	nization Name	Date of Receipt
Mailing Address 1323 Ada Lane			09 04 2019
City	State	Zip Code	Transaction ID : SA11AI.29511
Naperville	IL	60540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Insurance	VP		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 450.00	
UDTOTAL of Bessints This Bess (autisms)			75.00

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

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pethe name and address of any political committee RANCE COMPANY CIVIC FUND	erson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary Other (specify) General		Date of Receipt M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee.	Initial) or Full Organization Name State Zip Code 60540	Date of Receipt 10 02 2019 Transaction ID : SA11Al.29590 Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) VP Aggregate Year-to-Date ▼ 500.00	Payroll Deduction
Full Name of Individual (Last, First, Middle C. Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General	State Zip Code 60540	Date of Receipt 10 16 2019 Transaction ID : SA11Al.29638 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)	525.00	75.00

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

		LINE	PAGE		13	OF	186			
(check only one)										
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ashcraft, David, , , Date of Receipt Mailing Address 1323 Ada Lane 30 2019 City State Zip Code Transaction ID: SA11AI.29681 IL 60540 Naperville Amount of Each Receipt this Period FEC ID number of contributing В

federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Insurance Receipt For:	Occupation (for Individual) VP	Memo Item Payroll Deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle Ashcraft, David, , , Mailing Address 1323 Ada Lane	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 13 2019 Transaction ID : SA11Al.29723
Naperville FEC ID number of contributing	IL 60540	Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	25.00 Memo Item
Motorists Insurance Receipt For: Primary General Other (specify) ▼	VP Aggregate Year-to-Date ▼ 575.00	Payroll Deduction
Full Name of Individual (Last, First, Middle Ashcraft, David, , , Mailing Address 1323 Ada Lane	e Initial) or Full Organization Name	Date of Receipt 11 26 2019
City Naperville	State Zip Code IL 60540	Transaction ID : SA11AI.29765 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) VP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line num	ber only)	
		FEC Schedule A (Form 3X) Rev. 06/201

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

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FO	R LINE	NUMBER	: PAGE	= 14 OF	186				
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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	State Zip Code IL 60540 C Occupation (for Individual) VP Aggregate Year-to-Date 625.00	Date of Receipt 12 11 2019 Transaction ID: SA11AI.29808 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary Other (specify) Full Name of Individual (Last, First, Middle II) General Other (specify)	State Zip Code IL 60540 C Occupation (for Individual) VP Aggregate Year-to-Date 650,00	Date of Receipt 12 24 2019 Transaction ID: SA11Al.29851 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Begley, Jolie, , , Mailing Address 2645 McVey Blvd West City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43235 C Occupation (for Individual) AVP Aggregate Year-to-Date ▼	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)	>	65.00
TOTAL This Period (last page this line number	er only)	

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l			13		14		15		16	;	17

Any information copied from such Reports and sor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR			
Full Name of Individual (Last, First, Middle In Begley, Jolie, , , Mailing Address 2645 McVey Blvd West	nitial) or Full Organ	lization Name	Date of Receipt 07 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29368
Columbus	OH	43235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Insurance Group	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify) ▼			
Full Name of Individual (Last, First, Middle In Begley, Jolie, , , Mailing Address 2645 McVey Blvd West	nitial) or Full Organ	nization Name	Date of Receipt
	State	Zin Codo	08 07 2019
City Columbus	State OH	Zip Code 43235	Transaction ID : SA11Al.29388 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupati AVP	ion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 240,00	
Full Name of Individual (Last, First, Middle In Begley, Jolie, , ,	nitial) or Full Organ	nization Name	Date of Receipt
Mailing Address 2645 McVey Blvd West		Tip. On the	08 21 2019
City Columbus	State OH	Zip Code 43235	Transaction ID : SA11AI.29431
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Insurance Group	Occupati AVP	on (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year	r-to-Date ▼ 255.00	
SUBTOTAL of Receipts This Page (optional)		·····	45.00
TOTAL This Period (last page this line number	· only)		

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by the name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY CIVIC F	FUND						
Full Name of Individual (Last, First, Middle Begley, Jolie, , , Mailing Address 2645 McVey Blvd West	Initial) or Full Organization Name	Date of Receipt 09 04 2019						
City	State Zip Code	09 04 2019 Transaction ID : SA11Al.29510						
Columbus	'							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer (for Individual) Motorists Insurance Group	Motorists Insurance Group AVP							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.	00						
Full Name of Individual (Last, First, Middle Begley, Jolie, , , Mailing Address 2645 McVey Blvd West	Date of Receipt							
	09 18 2019							
City Columbus	State Zip Code OH 43235	Transaction ID : SA11AI.29552 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	15.00						
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285	.00						
Full Name of Individual (Last, First, Middle Begley, Jolie, , ,	Initial) or Full Organization Name	Date of Receipt						
Mailing Address 2645 McVey Blvd West		10 02 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						
City Columbus	State Zip Code 43235	Transaction ID : SA11AI.29591						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00						
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300	.00						
SUBTOTAL of Receipts This Page (optional)		45.00						
TOTAL This Period (last page this line numb	er only)							

Name of Employer (for Individual)

General

Motorists Insurance Group

Receipt For:

C.

Primary

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

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Memo Item

Payroll Deduction

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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Begley, Jolie, , , Date of Receipt Mailing Address 2645 McVey Blvd West 2019 16 City State Zip Code Transaction ID: SA11AI.29637 OH Columbus 43235 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Payroll Deduction Motorists Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Begley, Jolie, , , Date of Receipt Mailing Address 2645 McVey Blvd West 10 2019 City State Zip Code Transaction ID: SA11AI.29680 Columbus OH 43235 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee.

Other (specify) ▼		330.00	
Full Name of Individual (Last, First, Middle In Begley, Jolie, , , Mailing Address 2645 McVey Blvd West	Date of Receipt		
City	State	Zip Code	Transaction ID : SA11AI.29722
Columbus	ОН	43235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
Motorists Insurance Group	AVP		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate \	rear-to-Date ▼ 345.00	
SUBTOTAL of Receipts This Page (optional)			45.00

Occupation (for Individual)

Aggregate Year-to-Date ▼

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

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Begley, Jolie, , , Date of Receipt Mailing Address 2645 McVey Blvd West 2019 11 City State Zip Code Transaction ID: SA11AI.29764 ОН Columbus 43235 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Begley, Jolie, , , Date of Receipt Mailing Address 2645 McVey Blvd West 12 2019 City Zip Code State Transaction ID: SA11AI.29807 Columbus OH 43235 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. C.

Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼	Occupa AVP Aggregate Yea	ar-to-Date ▼	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Begley, Jolie, , , Mailing Address 2645 McVey Blvd West City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State OH	Zip Code 43235 tion (for Individual)	Date of Receipt 12 24 2019 Transaction ID: SA11AI.29850 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			45.00

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

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	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND						
Α.		ial) or Full Orga	anization Name	Date of Receipt					
	Mailing Address 5658 Tynecastle Loop			07 10 2019					
	City Dublin	State OH	Zip Code 43016	Transaction ID : SA11AI.29320 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) Motorists Insurance	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction					
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 700.00						
В.	Full Name of Individual (Last, First, Middle Initial Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Date of Receipt							
		07 26 2019							
	City Dublin	State OH	Zip Code 43016	Transaction ID : SA11AI.29364 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) Motorists Insurance	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction					
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 750.00						
<u> </u>	Full Name of Individual (Last, First, Middle Initi Benintendi, Jeff, , ,	ial) or Full Orga	anization Name	Date of Receipt					
	Mailing Address 5658 Tynecastle Loop			08 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Dublin	State OH	Zip Code 43016	Transaction ID : SA11AI.29389 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) Motorists Insurance	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction					
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼						
H	SUBTOTAL of Receipts This Page (optional)		<u>^</u>	150.00					
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		used by any person for the purpose of soliciting contributions tical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIV	/IC FUND
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	nitial) or Full Organization Name	Date of Receipt 08 21 2019
City	State Zip Code	Transaction ID : SA11AI.29432
Dublin	OH 43016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individ	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	850.00
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Date of Receipt	
City	State 7in Code	09 04 2019
City Dublin	State Zip Code 43016	Transaction ID : SA11Al.29509 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individ	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	900.00
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop City	State Zip Code	09 18 2019 Transaction ID : \$44141 20554
Dublin	OH 43016	Transaction ID : SA11AI.29551 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individ	ual) Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	950.00
SUBTOTAL of Receipts This Page (optional).	1	150.00
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMF	PANY CIVIC FUND			
Full Name of Individual (Last, First, Middle I Benintendi, Jeff, , ,	Initial) or Full Organi	ization Name	Date of Receipt		
Mailing Address 5658 Tynecastle Loop			10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City		Zip Code	Transaction ID : SA11AI.29588		
Dublin	ОН	43016	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer (for Individual) Motorists Insurance	Occupation	on (for Individual)	Memo Item Payroll Deduction		
Receipt For:		-to-Date ▼	1 ayron Deduction		
Primary General Other (specify) ▼	Primary General Aggregate real-to-bate V				
Full Name of Individual (Last, First, Middle I Benintendi, Jeff, , ,	Initial) or Full Organi	ization Name	Date of Receipt		
Mailing Address 5658 Tynecastle Loop			10 16 2019		
City		Zip Code	Transaction ID : SA11Al.29636		
Dublin	ОН	43016	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer (for Individual) Motorists Insurance	Occupation EVP	on (for Individual)	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 1050.00			
Full Name of Individual (Last, First, Middle I	nitial) or Full Organi	ization Name			
Benintendi, Jeff, , ,			Date of Receipt		
Mailing Address 5658 Tynecastle Loop City	State	Zip Code	10 30 2019		
Dublin	OH	43016	Transaction ID : SA11AI.29679 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual)	Name of Employer (for Individual) Motorists Insurance Occupation (for Individual) EVP				
Receipt For:	Payroll Deduction				
Primary General Other (specify)	Aggregate Year	-to-Date ▼ 1100.00			
SUBTOTAL of Receipts This Page (optional)			150.00		
TOTAL This Period (last page this line number	er only)				

Name of Employer (for Individual)

General

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

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

Motorists Insurance

Primary

Receipt For:

C.

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

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Memo Item

Payroll Deduction

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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Benintendi, Jeff, , , Date of Receipt Mailing Address 5658 Tynecastle Loop 2019 11 13 City State Zip Code Transaction ID: SA11AI.29721 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Benintendi, Jeff, , , Date of Receipt Mailing Address 5658 Tynecastle Loop 11 2019 City State Zip Code Transaction ID: SA11AI.29763 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

Other (specify) ▼	4	1200.00				
Full Name of Individual (Last, First, Middle In Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Date of Receipt					
City	State	Zip Code	Transaction ID : SA11AI.29806			
Dublin	OH	43016	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item			
Motorists Insurance	EVP		Payroll Deduction			
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 1250.00				
NUDTOTAL of Preside This Press (autisms)			150.00			

Occupation (for Individual)

Aggregate Year-to-Date ▼

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Any information copied from such Reports and S	tatements may not be sold or used by any pers	on for the purpose of soliciting contributions
or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Init Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	tial) or Full Organization Name	Date of Receipt
City	State 7in Code	12 24 2019
City Dublin	State Zip Code OH 43016	Transaction ID : SA11Al.29849 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance	EVP	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt
Mailing Address 5300 Snider Loop	07 10 2019	
City	State Zip Code	Transaction ID : SA11AI.29296
New Albany	OH 43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occupation (for Individual) AVP Marketing	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 206,25	
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt
Mailing Address 5300 Snider Loop		07 26 2019
City	State Zip Code	Transaction ID : SA11AI.29343
New Albany	OH 43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Memo Item Payroll Deduction	
Receipt For:		
Primary General Other (specify)	221.25	
SUBTOTAL of Receipts This Page (optional)	>	80.00
TOTAL This Period (last page this line number	only)	

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	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	JRANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Bills, Alissa, , , Mailing Address 5300 Snider Loop	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	08 07 2019 Transaction ID : SA11Al.29390
New Albany	OH 43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occupation (for Individual) AVP Marketing	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 236.25	
Full Name of Individual (Last, First, Middle Bills, Alissa, , , Mailing Address 5300 Snider Loop	Initial) or Full Organization Name	Date of Receipt
	Jan Jan au	08 21 2019
City New Albany	State Zip Code OH 43054	Transaction ID : SA11AI.29433
FEC ID number of contributing federal political committee.	C 43034	Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occupation (for Individual) AVP Marketing	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 251.25	
Full Name of Individual (Last, First, Middle Bills, Alissa, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 5300 Snider Loop		09
City New Albany	State Zip Code OH 43054	Transaction ID : SA11AI.29508 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occupation (for Individual) AVP Marketing	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.25	
SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line num	ber only)	

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	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	address of any political committee	e to solicit contributions from such committee.
	MOTORISTS MUTUAL INSURA			
Α.	Full Name of Individual (Last, First, Middle Initial Bills, Alissa, , ,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 5300 Snider Loop			09 18 2019
	City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.29550 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co.		upation (for Individual) P Marketing	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 281.25	
В.	Full Name of Individual (Last, First, Middle Initial Bills, Alissa, , , Mailing Address 5300 Snider Loop	al) or Full C	Organization Name	Date of Receipt
	City New Albany	State OH	Zip Code 43054	Transaction ID : SA11Al.29581 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co.		upation (for Individual) P Marketing	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 296.25	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Bills, Alissa, , ,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 5300 Snider Loop			10 16 2019
	City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.29635 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co.		upation (for Individual) Marketing	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 311.25	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bills, Alissa, , , Date of Receipt Mailing Address 5300 Snider Loop 30 2019 City State Zip Code Transaction ID: SA11AI.29678 ОН 43054 New Albany Amount of Each Receipt this Period FEC ID number of contributing 15.00

federal political co	ommittee.	<u> </u>		4-14-14-14-14-14-14-14-14-14-14-14-14-14
Name of Employe	er (for Individual)	Occi	upation (for Individual)	Memo Item
Motorists Mutual I	Insurance Co.	AVF	Marketing	Payroll Deduction
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 326.25	
Full Name of Indi B. Bills, Alissa, Mailing Address City New Albany FEC ID number of	5300 Snider Loop	State OH	Zip Code 43054	Date of Receipt 11 13 2019 Transaction ID : SA11AI.29720 Amount of Each Receipt this Period
Name of Employ Motorists Mutual I Receipt For: Primary Other (spec	er (for Individual) Insurance Co.	AVE	upation (for Individual) P Marketing Year-to-Date ▼ 341,25	Memo Item Payroll Deduction
c. Bills, Alissa,	ividual (Last, First, Middle Initia 5300 Snider Loop	al) or Full O	rganization Name	Date of Receipt 11 26 2019
City New Albany		State	Zip Code 43054	Transaction ID : SA11AI.29762
Primary Other (special politics)	er (for Individual) Insurance Co. General	Occi AVP	upation (for Individual) Marketing Year-to-Date ▼ 356.25	Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Rec	reipts This Page (optional)		>	45.00
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				FEC Schedule A (Form 3X) Rev. 06/20

Motorists Insurance Group

Other (specify)

General

Receipt For:

Primary

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bills, Alissa,,, Date of Receipt Mailing Address 5300 Snider Loop 2019 City Zip Code State Transaction ID: SA11AI.29805 OH New Albany 43054 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AVP Marketing** Motorists Mutual Insurance Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 371.25 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bills, Alissa, , , Date of Receipt Mailing Address 5300 Snider Loop 2019 City State Zip Code Transaction ID: SA11AI.29848 New Albany OH 43054 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co. Payroll Deduction **AVP Marketing** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 386.25 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Binau, Ryan, , , Date of Receipt Mailing Address 2979 Plymouth Ct. 16 2019 City Zip Code State Transaction ID: SA11AI.29634 OH Powell 43065 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

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AVP

Aggregate Year-to-Date ▼

Payroll Deduction

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Binau, Ryan, , , Date of Receipt Mailing Address 2979 Plymouth Ct. 2019 City Zip Code State Transaction ID: SA11AI.29677 OH Powell 43065 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Binau, Ryan, , , Date of Receipt Mailing Address 2979 Plymouth Ct. 13 2019 11 City State Zip Code Transaction ID: SA11AI.29719 OH Powell 43065 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 230.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Binau, Ryan, , , Date of Receipt Mailing Address 2979 Plymouth Ct. 26 2019 City State Zip Code Transaction ID: SA11AI.29761 OH Powell 43065 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group AVP Receipt For: Aggregate Year-to-Date ▼ Primary General

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COM	MPANY CIVIC FUND	
Α.	Mailing Address 2979 Plymouth Ct. City Powell FEC ID number of contributing federal political committee.	State OH	Zip Code 43065	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29804 Amount of Each Receipt this Period 10.00
	Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼	Payroll Deduction
В.	Full Name of Individual (Last, First, Middle Init Binau, Ryan, , , Mailing Address 2979 Plymouth Ct.			Date of Receipt 12 24 2019
	City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼	Aggregate Ye	, 260.00	Amount of Each Receipt this Period 10.00 Memo Item Payroll Deduction
c.	Full Name of Individual (Last, First, Middle Init Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place City Bettendorf FEC ID number of contributing federal political committee. Name of Employer (for Individual) lowa Mutual Ins. Co. Receipt For: Primary General Other (specify)	State IA	Zip Code 52722 ation (for Individual)	Date of Receipt Mo7 10 2019 Transaction ID: SA11AI.29314 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
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			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COM	IPANY CIVIC FUNE)
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place	Initial) or Full Orga	nization Name	Date of Receipt
City	State	Zip Code	07 26 2019
Bettendorf	IA	52722	Transaction ID : SA11AI.29358 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) lowa Mutual Ins. Co.	Sr. V.P		Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 225.00	
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place	Initial) or Full Orga	nization Name	Date of Receipt
City	State	Zip Code	08 07 2019 Transaction ID : SA11Al.29405
Bettendorf	IA	52722	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) lowa Mutual Ins. Co.	Occupa Sr. V.P	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr.,	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 4915 Norfolk Place			08 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bettendorf	State IA	Zip Code 52722	Transaction ID : SA11AI.29435
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) lowa Mutual Ins. Co.	Occupa Sr. V.P.	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 255.00	
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			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COM	IPANY CIVIC FUNE)
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place	Initial) or Full Orga	anization Name	Date of Receipt
City	State	Zip Code	09 04 2019
Bettendorf	IA	52722	Transaction ID : SA11AI.29506 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) lowa Mutual Ins. Co.	Occupa Sr. V.F	ation (for Individual) D.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place	Initial) or Full Orga	anization Name	Date of Receipt
Oth	04-4-	7:- 0-1-	09 18 2019
City Bettendorf	State	Zip Code 52722	Transaction ID : SA11AI.29548
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period	
Name of Employer (for Individual) Iowa Mutual Ins. Co.	Occupa Sr. V.F	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 285.00	
Full Name of Individual (Last, First, Middle Bright, Jon, A., Mr.,	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 4915 Norfolk Place City	State	Zip Code	10 02 2019
Bettendorf	IA	52722	Transaction ID : SA11AI.29570 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) lowa Mutual Ins. Co.	Occupa Sr. V.P	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			45.00
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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may r	not be sold or used by any pess of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle I Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place	Initial) or Full Orga	nization Name	Date of Receipt				
			10 16 2019				
City Bettendorf	State	Zip Code 52722	Transaction ID : SA11AI.29633				
	IA .	32122	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item				
lowa Mutual Ins. Co.	Sr. V.P.		Payroll Deduction				
Receipt For:	Aggregate Yea	ar-to-Date ▼					
Primary General Other (specify) ▼	1	315.00]				
Full Name of Individual (Last, First, Middle I	Initial) or Full Orga	nization Name	Date of Receipt				
Mailing Address 4915 Norfolk Place			10 30 / Y Y Y Y Y Y				
City	State	Zip Code	Transaction ID : SA11AI.29675				
Bettendorf	IA	52722	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.							
Name of Employer (for Individual) lowa Mutual Ins. Co.	Occupa Sr. V.P	tion (for Individual)	Memo Item Payroll Deduction				
Receipt For:	Aggregate Yea	ar-to-Date ▼					
Primary General Other (specify) ▼	4	330.00]				
Full Name of Individual (Last, First, Middle I	Initial) or Full Orga	nization Name	Date of Receipt				
Mailing Address 4915 Norfolk Place			11 13 2019				
City	State	Zip Code	Transaction ID : SA11AI.29718				
Bettendorf	IA	52722	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		15.00				
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item				
Iowa Mutual Ins. Co.	Sr. V.P.		Payroll Deduction				
Receipt For: Primary General	Aggregate Yea	ar-to-Date ▼					
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY (CIVIC FUND	
Full Name of Individual (Last, First, Middle In Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place City Bettendorf FEC ID number of contributing federal political committee. Name of Employer (for Individual) lowa Mutual Ins. Co. Receipt For: Primary Other (specify)	State Zip Code 52722 C Occupation (for Ind Sr. V.P. Aggregate Year-to-Date	ividual)	Date of Receipt M M
Full Name of Individual (Last, First, Middle I Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place City Bettendorf FEC ID number of contributing federal political committee. Name of Employer (for Individual) lowa Mutual Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code 52722 C Occupation (for Ind Sr. V.P. Aggregate Year-to-Date ▼	lividual)	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29803 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Bright, Jon, A., Mr., Mailing Address 4915 Norfolk Place City Bettendorf FEC ID number of contributing federal political committee. Name of Employer (for Individual) lowa Mutual Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code 52722 C Occupation (for Ind Sr. V.P. Aggregate Year-to-Date V	ividual)	Date of Receipt 12
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brock, Thomas, J.,, Date of Receipt Mailing Address 60 E. Spring St. #326 2019 10 City Zip Code State Transaction ID: SA11AI.29341 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Asst. VP Motorists Mutual Ins Co Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brock, Thomas, J., , Date of Receipt Mailing Address 60 E. Spring St. #326 07 2019 City State Zip Code Transaction ID: SA11AI.29385 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co Payroll Deduction Asst. VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Brock, Thomas, J., , Date of Receipt Mailing Address 60 E. Spring St. #326 07 2019 City Zip Code State Transaction ID: SA11AI.29427 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins Co Asst. VP Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMI	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326	Initial) or Full Organ	ization Name	Date of Receipt
City	State	Zip Code	08 21 2019
Columbus	OH	43215	Transaction ID : SA11AI.29436 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupati Asst. VP	on (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 255.00	
Full Name of Individual (Last, First, Middle Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326	Initial) or Full Organ	ization Name	Date of Receipt
City	Otat-	7:n Code	09 04 2019
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29505
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period	
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupati Asst. VF	ion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle Brock, Thomas, J., ,	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 60 E. Spring St. #326			09 18 2019
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29547
FEC ID number of contributing federal political committee.	С	70210	Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupati Asst. VP	ion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year	r-to-Date ▼ 285.00	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Brock, Thomas, J., , Date of Receipt Mailing Address 60 E. Spring St. #326 2019 Citv State Zip Code В

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Columbus	ОН	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
Motorists Mutual Ins Co	Asst.	VP	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle Brock, Thomas, J., ,	Initial) or Full Org	anization Name	Date of Receipt
Mailing Address 60 E. Spring St. #326			10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.29632
Columbus	OH	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occup Asst.	ation (for Individual) VP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 315.00	
Full Name of Individual (Last, First, Middle Brock, Thomas, J., ,	Initial) or Full Org	anization Name	Date of Receipt
Mailing Address 60 E. Spring St. #326			10 30 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.29674
Columbus	ОН	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occup Asst. \	ation (for Individual) /P	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 330.00	
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND				
Full Name of Individual (Last, First, Middle In Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326	itial) or Full Organization Name	Date of Receipt			
City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code 43215 C Occupation (for Individual)	Transaction ID : SA11AI.29717 Amount of Each Receipt this Period 15.00 Memo Item			
Motorists Mutual Ins Co Receipt For: Primary General Other (specify) ▼	Asst. VP Aggregate Year-to-Date ▼ 345.00	Payroll Deduction			
Full Name of Individual (Last, First, Middle In Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326 City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) Asst. VP Aggregate Year-to-Date ▼ 360.00	Date of Receipt 11 26 2019 Transaction ID : SA11Al.29759 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction			
Full Name of Individual (Last, First, Middle Ini Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326 City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) Asst. VP Aggregate Year-to-Date 375.00	Date of Receipt 12 11 2019 Transaction ID : SA11Al.29802 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction			
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Care (openly) V	,	4 14	
Full Name of Individual (Last, First, Middle In Campbell, Grady, , $Mr.$,	Date of Receipt		
Mailing Address 5760 Whispering Trail			07 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29359
Galena	ОН	43021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Sr. VP	Marketing Services & PL	Payroll Deduction
Receipt For: Primary General Other (specify)			
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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr., Mailing Address 5760 Whispering Trail	Date of Receipt		
	City	08 07 2019		
	Galena	Transaction ID : SA11AI.29406 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	I .	ation (for Individual)	Memo Item
	Motorists Mutual Ins. Co. Receipt For:		Marketing Services & PL	Payroll Deduction
	Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 400.00	
В.	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr.,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 5760 Whispering Trail	State	Zip Code	08 21 2019
	City Galena	Transaction ID : SA11AI.29437		
	FEC ID number of contributing federal political committee.	ОН	43021	Amount of Each Receipt this Period 25.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		ation (for Individual) P Marketing Services & PL	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye		
С .	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr.,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 5760 Whispering Trail			09
	City Galena	State OH	Zip Code 43021	Transaction ID : SA11AI.29504 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		ation (for Individual) Marketing Services & PL	Memo Item Payroll Deduction
	Receipt For: Primary General	Aggregate Ye	ear-to-Date ▼	
	Other (specify)		450.00	
H	SUBTOTAL of Receipts This Page (optional)			75.00

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	y information copied from such Reports and Stator commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr.,	al) or Full Org	ganization Name	Date of Receipt
	Mailing Address 5760 Whispering Trail			09 18 2019
	City	State	Zip Code	Transaction ID : SA11AI.29546
	Galena	ОН	43021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item
	Motorists Mutual Ins. Co.	Ι .	P Marketing Services & PL	Payroll Deduction
	Receipt For:			- Advising Boddonon
	Primary General	Aggregate Y	'ear-to-Date ▼	
	Other (specify) ▼		475.00	
	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr.,	al) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 5760 Whispering Trail			10 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.29565
	Galena	OH	43021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	25.00		
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		pation (for Individual) P Marketing Services & PL	Memo Item Payroll Deduction
	Receipt For:	Aggregate Y	∕ear-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr.,	al) or Full Or	ganization Name	Date of Receipt
Ο.	Mailing Address 5760 Whispering Trail			10 16 2019
	City	State	Zip Code	Transaction ID : SA11AI.29631
	Galena	OH	43021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item
	Motorists Mutual Ins. Co.		P Marketing Services & PL	Payroll Deduction
	Receipt For:	ı		
	Primary General	Ayyreyale 1	'ear-to-Date ▼	
	Other (specify)		525.00	
s	UBTOTAL of Receipts This Page (optional)		·····	75.00
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	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initi Campbell, Grady, , Mr., Mailing Address 5760 Whispering Trail	Date of Receipt 10 30 2019		
	City Galena	State OH	Zip Code 43021	Transaction ID : SA11AI.29673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	25.00		
	Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General	'	ation (for Individual) Marketing Services & PL ear-to-Date ▼	Memo Item Payroll Deduction
	Other (specify) ▼		550.00	
В.	Full Name of Individual (Last, First, Middle Initial Campbell, Grady, , Mr., Mailing Address 5760 Whispering Trail	al) or Full Orga	anization Name	Date of Receipt 11 13 2019
	City Galena	State	Zip Code 43021	Transaction ID : SA11AI.29716
	FEC ID number of contributing federal political committee.	С	45021	Amount of Each Receipt this Period 25.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.	1 .	ation (for Individual) Marketing Services & PL	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 575.00	
С .	Full Name of Individual (Last, First, Middle Initi Campbell, Grady, , Mr.,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 5760 Whispering Trail		I and a second	11 26 2019
	City Galena	State OH	Zip Code 43021	Transaction ID : SA11AI.29758 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		ation (for Individual) Marketing Services & PL	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 600.00	
H	SUBTOTAL of Receipts This Page (optional)			75.00

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Campbell, Grady, , Mr., Date of Receipt Mailing Address 5760 Whispering Trail 2019 City State Zip Code Transaction ID: SA11AI.29801 OH Galena 43021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sr. VP Marketing Services & PL Payroll Deduction Motorists Mutual Ins. Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Campbell, Grady, , Mr., Date of Receipt Mailing Address 5760 Whispering Trail 12 2019 City State Zip Code Transaction ID: SA11AI.29844 OH Galena 43021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction Sr. VP Marketing Services & PL Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	1	650.00	
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive	Date of Receipt 07 10 2019		
City	State	Zip Code	Transaction ID : SA11AI.29305
Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co.	C	ation (for Individual) ant Vice President Life Adm.	Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)			65.00

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	Statements may not be sold or used by any pathe name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Date of Receipt 07 26 2019 Transaction ID : SA11AI.29349 Amount of Each Receipt this Period 15.00 Memo Item	
Motorists Life Ins. Co. Receipt For: Primary General Other (specify) ▼	Payroll Deduction	
Full Name of Individual (Last, First, Middle Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co. Receipt For: Primary General Other (specify) Committee	State OH Zip Code 43230 C Occupation (for Individual) Assistant Vice President Life Adm. Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M / 07 2019 Transaction ID : SA11Al.29397 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43230 C Occupation (for Individual) Assistant Vice President Life Adm. Aggregate Year-to-Date ▼ 255.00	Date of Receipt 08 21 2019 Transaction ID: SA11AI.29438 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional).		45.00
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	Statements may not be sold or used by any per name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43230 C Occupation (for Individual) Assistant Vice President Life Adm. Aggregate Year-to-Date ▼ 270.00	Date of Receipt 09 04 2019 Transaction ID: SA11AI.29503 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co. Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle In	State Zip Code OH 43230 C Occupation (for Individual) Assistant Vice President Life Adm. Aggregate Year-to-Date 285.00	Date of Receipt 18 2019 Transaction ID: SA11Al.29545 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive City Gahanna FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43230 C Occupation (for Individual) Assistant Vice President Life Adm. Aggregate Year-to-Date 300.00	Date of Receipt 10 02 2019 Transaction ID: SA11Al.29571 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	<u> </u>	45.00
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs., Mailing Address 4282 Hunts Drive	nitial) or Full Orga	nization Name	Date of Receipt
011		7.01	10 16 2019
City Gahanna	State OH	Zip Code 43230	Transaction ID : SA11AI.29630
	3 11	73230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		15.00	
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Life Ins. Co.	Assista	int Vice President Life Adm.	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	ar-to-Date ▼ 315.00		
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs.,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 4282 Hunts Drive	Ot-1	Zip Code	10 30 7 2019
City Gahanna	State	Zip Code 43230	Transaction ID : SA11AI.29672
	J11	+3230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Life Ins. Co.		ation (for Individual) ant Vice President Life Adm.	Memo Item Payroll Deduction
Receipt For: Primary General	Aggregate Yea		
Other (specify) ▼	4	330.00	
Full Name of Individual (Last, First, Middle In Craig, Camille, , Mrs.,	nitial) or Full Orga	inization Name	Date of Receipt
Mailing Address 4282 Hunts Drive	lo:	77. 0.4.	11 13 2019
City Gahanna	State OH	Zip Code 43230	Transaction ID : SA11AI.29715
FEC ID number of contributing	1.1.1.1		Amount of Each Receipt this Period
federal political committee.	C		15.00
Name of Employer (for Individual)		tion (for Individual)	Memo Item
Motorists Life Ins. Co. Receipt For:		nt Vice President Life Adm.	Payroll Deduction
Primary General	Aggregate Yea	ar-to-Date ▼	
Other (specify)		345.00	
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Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Craig, Camille, , Mrs., Date of Receipt Mailing Address 4282 Hunts Drive 11 2019 City Zip Code State Transaction ID: SA11AI.29757 OH Gahanna 43230 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assistant Vice President Life Adm. Motorists Life Ins. Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Craig, Camille, , Mrs., Date of Receipt Mailing Address 4282 Hunts Drive 12 2019 City State Zip Code Transaction ID: SA11AI.29800 OH Gahanna 43230 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Life Ins. Co. Payroll Deduction Assistant Vice President Life Adm. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 375.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Craig, Camille, , Mrs., Date of Receipt Mailing Address 4282 Hunts Drive 24 2019 City Zip Code State Transaction ID: SA11AI.29843 OH Gahanna 43230 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Life Ins. Co. Assistant Vice President Life Adm.

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\rangle	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAN	ICE COM	IPANY CIVIC FUND	
١.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive) or Full Orga	nization Name	Date of Receipt
				07 10 2019
	City	State OH	Zip Code	Transaction ID : SA11AI.29317
	Blacklick	ОП	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co	tion (for Individual) ommercial Production & Service	Memo Item	
	Pagaint For:			Payroll Deduction
	Primary General	Aggregate Yea		
	Other (specify) ▼		210.00	
— 3.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr.,	or Full Orga	nization Name	Date of Receipt
	Mailing Address 7918 Brianna Drive			07 26 2019
	City	State	Zip Code	Transaction ID : SA11AI.29361
	Blacklick	ОН	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual) ommercial Production & Service	Memo Item Payroll Deduction
		Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr.,) or Full Orga	nization Name	Date of Receipt
	Mailing Address 7918 Brianna Drive			08 07 2019
	City	State	Zip Code	Transaction ID : SA11AI.29408
	Blacklick	ОН	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual)	Memo Item Payroll Deduction
	Pagaint For:	l .	ommercial Production & Services	. ayron beddenor
	Primary General	Aggregate Yea		
	Other (specify)		240.00	
s	UBTOTAL of Receipts This Page (optional)		>	45.00
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	y information copied from such Reports and Stat for commercial purposes, other than using the na			
\rangle	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAN	ICE COM	PANY CIVIC FUND	
١.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Blacklick	State OH	Zip Code 43004	Transaction ID : SA11AI.29439 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		15.00	
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual) ommercial Production & Service	Memo Item Payroll Deduction
	Possint For:	ar-to-Date ▼ 255.00	Payron Deduction	
3.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive) or Full Orgar	nization Name	Date of Receipt
	City Blacklick	State OH	Zip Code 43004	09 04 2019 Transaction ID : SA11Al.29502 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual) ommercial Production & Service	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 270.00	
).	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr.,) or Full Orgar	nization Name	Date of Receipt
	Mailing Address 7918 Brianna Drive			09 18 2019
	City Blacklick	State OH	Zip Code 43004	Transaction ID : SA11AI.29544 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Yea	ur-to-Date ▼ 285.00	
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\rangle	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAN	NCE COM	IPANY CIVIC FUND	
٨.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive) or Full Orga	nization Name	Date of Receipt
	City	State	Zip Code	10 02 2019 Transaction ID : SA11Al.29578
	Blacklick	OH	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual) Commercial Production & Service	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 300.00	
3.	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive) or Full Orga	nization Name	Date of Receipt
	City Blacklick	State OH	Zip Code 43004	Transaction ID : SA11Al.29629 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		ation (for Individual) Commercial Production & Service	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 315.00	
).	Full Name of Individual (Last, First, Middle Initial Eppley, Jason, M, Mr.,) or Full Orga	inization Name	Date of Receipt
	Mailing Address 7918 Brianna Drive City	State	Zip Code	10 30 2019
	Blacklick	OH	43004	Transaction ID : SA11AI.29671 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Insurance Co		tion (for Individual) ommercial Production & Services	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 330.00	
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Any information conied from such Reports and	d Statements may not be sold or used by any person	on for the nurnose of soliciting contributions
or for commercial purposes, other than using	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Eppley, Jason, M, Mr., Mailing Address 7918 Brianna Drive	Initial) or Full Organization Name	Date of Receipt 11 13 2019
City	State Zip Code	Transaction ID : SA11AI.29714
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Insurance Co	AVP, Commercial Production & Service	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
Full Name of Individual (Last, First, Middle B. Eppley, Jason, M, Mr.,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 7918 Brianna Drive		11 26 2019
City	State Zip Code	Transaction ID : SA11AI.29756
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co	Occupation (for Individual) AVP, Commercial Production & Service	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name of Individual (Last, First, Middle Eppley, Jason, M, Mr.,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 7918 Brianna Drive		12 11 2019
City	State Zip Code	Transaction ID : SA11AI.29799
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Insurance Co	Occupation (for Individual) AVP, Commercial Production & Services	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	375.00	
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Name of Employer (for Individual)

General

Motorists Insurance Group

Receipt For:

C

Primary

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

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Memo Item

Payroll Deduction

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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Eppley, Jason, M, Mr., Date of Receipt Mailing Address 7918 Brianna Drive 2019 City State Zip Code Transaction ID: SA11AI.29842 OH Blacklick 43004 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co AVP, Commercial Production & Service Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 07 10 2019 City State Zip Code Transaction ID: SA11AI.29316 Winfield WV 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee.

Other (specify) ▼	350.00	
Full Name of Individual (Last, First, Middle In Fallen, Hope, , , Mailing Address 2642 Blue Lick Rd.		Date of Receipt 07 26 2019
City Winfield	State Zip Code WV 25213	Transaction ID : SA11AI.29360 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance Group	AVP	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 375.00	
		65.00

Occupation (for Individual)

AVP

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Aggregate Year-to-Date ▼

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIVIC FUND)
Full Name of Individual (Last, First, Middle Fallen, Hope, , , Mailing Address 2642 Blue Lick Rd.	Initial) or Full Organization Name	Date of Receipt
		08 07 2019
City Winfield	State Zip Code WV 25213	Transaction ID : SA11AI.29407
	25213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual)	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	Faylon Deduction
Primary General Other (specify) ▼	400.00	
Full Name of Individual (Last, First, Middle Fallen, Hope, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 2642 Blue Lick Rd.		08 21 2019
City	State Zip Code	Transaction ID : SA11AI.29440
Winfield	WV 25213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	
Fallen, Hope, , ,		Date of Receipt
Mailing Address 2642 Blue Lick Rd.		09 04 2019
City	State Zip Code	Transaction ID : SA11AI.29501
Winfield	WV 25213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance Group	AVP	Payroll Deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	450.00	
SUBTOTAL of Receipts This Page (optional).		75.00
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 2019 18 City Zip Code State Transaction ID: SA11AI.29543 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 10 2019 City State Zip Code Transaction ID: SA11AI.29596 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction **AVP** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 10 16 2019 City Zip Code State Transaction ID: SA11AI.29628 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group AVP Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify)

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

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FEC Schedule A (Form 3X) Rev. 06/2016

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 2019 City Zip Code State Transaction ID: SA11AI.29670 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 13 2019 11 City State Zip Code Transaction ID: SA11AI.29713 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction **AVP** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 575.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 26 2019 City Zip Code State Transaction ID: SA11AI.29755 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group AVP Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Fallen, Hope, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 2642 Blue Lick Rd.		12 11 2019
City	State Zip Code WV 25213	Transaction ID : SA11AI.29798
Winfield	WV 25213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance Group	AVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	625.00	
Full Name of Individual (Last, First, Middle Fallen, Hope, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 2642 Blue Lick Rd.		12 24 2019
City	State Zip Code	-
Winfield	WV 25213	Transaction ID : SA11AI.29840 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name of Individual (Last, First, Middle C. Fee, Jeffrey, S, ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 537 Courtright Court		07 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.29318
Pickerington	OH 43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Asst Vice President Commercial Lines	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	210.00	
SUBTOTAL of Receipts This Page (optional).	•	65.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COM	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Fee, Jeffrey, S, , Mailing Address 537 Courtright Court	Initial) or Full Organ	ization Name	Date of Receipt
City	State	Zip Code	07 26 2019
Pickerington	OH	43147	Transaction ID : SA11AI.29362 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	'	on (for Individual) e President Commercial Lines	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 225.00	
Full Name of Individual (Last, First, Middle Fee, Jeffrey, S, , Mailing Address 537 Courtright Court	Initial) or Full Organ	ization Name	Date of Receipt
City	State	Zip Code	08 07 2019
Pickerington	OH	43147	Transaction ID: SA11AI.29409 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.		ion (for Individual) e President Commercial Lines	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle C. Fee, Jeffrey, S, ,	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 537 Courtright Court	Ctata	7in Codo	08 21 2019
City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.29441 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.		ion (for Individual) e President Commercial Lines	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 255.00	
SUBTOTAL of Receipts This Page (optional)			45.00
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Fee, Jeffrey, S, ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 537 Courtright Court		09 04 2019
City Pickerington	State Zip Code OH 43147	Transaction ID : SA11AI.29500 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For:	Occupation (for Individual) Asst Vice President Commercial Lines	Memo Item Payroll Deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle In Fee, Jeffrey, S, , Mailing Address 537 Courtright Court	nitial) or Full Organization Name	Date of Receipt
City Pickerington	State Zip Code OH 43147	09 18 2019 Transaction ID : SA11AI.29542 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Asst Vice President Commercial Lines	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	
Full Name of Individual (Last, First, Middle Ir	nitial) or Full Organization Name	Date of Receipt
Mailing Address 537 Courtright Court	State Zin Code	10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pickerington	State Zip Code OH 43147	Transaction ID : SA11AI.29579 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For:	Occupation (for Individual) Asst Vice President Commercial Lines	Memo Item Payroll Deduction
Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)	>	45.00
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fee, Jeffrey, S,, Date of Receipt Mailing Address 537 Courtright Court 2019 16 City State Zip Code Transaction ID: SA11AI.29627 Pickerington OH 43147 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Asst Vice President Commercial Lines Payroll Deduction Motorists Mutual Ins. Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Fee, Jeffrey, S, , Date of Receipt Mailing Address 537 Courtright Court 10 2019 City State Zip Code Transaction ID: SA11AI.29669 Pickerington OH 43147 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction Asst Vice President Commercial Lines Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00

		7 4	
Full Name of Individual (Last, First, Middle In Fee, Jeffrey, $S,\ ,$	itial) or Full Or	ganization Name	Date of Receipt
Mailing Address 537 Courtright Court			11 13 2019
City	State	Zip Code	Transaction ID : SA11AI.29712
Pickerington	ОН	43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Asst	Vice President Commercial Lines	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 345.00	
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\rangle	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAN	NCE COM	IPANY CIVIC FUND	
١.	Full Name of Individual (Last, First, Middle Initial Fee, Jeffrey, S, , Mailing Address 537 Courtright Court) or Full Orga	nization Name	Date of Receipt
		Ta	I =: 0 .	11 26 2019
	City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.29754
	FEC ID number of contributing federal political committee.	C	4044	Amount of Each Receipt this Period
	Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)		tion (for Individual) ce President Commercial Lines ar-to-Date ▼ 360.00	Memo Item Payroll Deduction
3.	Full Name of Individual (Last, First, Middle Initial Fee, Jeffrey, S, , Mailing Address 537 Courtright Court) or Full Orga	nization Name	Date of Receipt 12 11 2019
	City	State	Zip Code	Transaction ID : SA11Al.29797
	Pickerington FEC ID number of contributing federal political committee.	ОН	43147	Amount of Each Receipt this Period
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		tion (for Individual) ce President Commercial Lines	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 375.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Fee, Jeffrey, S, ,) or Full Orga	nization Name	Date of Receipt
	Mailing Address 537 Courtright Court	0	7. 0.4	12 24 2019
	City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.29839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.		tion (for Individual) ce President Commercial Lines	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 390.00	
s	UBTOTAL of Receipts This Page (optional)		>	45.00
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NAI	commercial purposes, other than using the note of COMMITTEE (In Full) OTORISTS MUTUAL INSURAL		, ,	to solicit contributions from such committee.
Full A. Fe	Name of Individual (Last, First, Middle Initia Idner, Cynthia, , , ling Address 5367 Stotlz Ave			Date of Receipt
City		State	Zip Code	07 10 2019 Transaction ID : SA11AI.29308
Gro	oveport	ОН	43125	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С		15.00
	ne of Employer (for Individual) orists Mutual Ins. Co.		upation (for Individual)	Memo Item Payroll Deduction
	wint For:		Year-to-Date ▼ 210.00	
B. Fe	Name of Individual (Last, First, Middle Initia Eldner, Cynthia, , , ling Address 5367 Stotlz Ave	l) or Full O	rganization Name	Date of Receipt
City	veport	State OH	Zip Code 43125	7 26 2019 Transaction ID : SA11Al.29352 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		15.00
	ne of Employer (for Individual) orists Mutual Ins. Co.		upation (for Individual) Accounting	Memo Item Payroll Deduction
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
	Name of Individual (Last, First, Middle Initiaeldner, Cynthia, , ,	l) or Full O	rganization Name	Date of Receipt
	ling Address 5367 Stotlz Ave			08 07 2019
City	oveport	State OH	Zip Code 43125	Transaction ID : SA11AI.29400 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		15.00
Mot	ne of Employer (for Individual) orists Mutual Ins. Co.		upation (for Individual) Accounting	Memo Item Payroll Deduction
Rec	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Feldner, Cynthia, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 5367 Stotlz Ave		08 21 2019
City	State Zip Code OH 43125	Transaction ID : SA11AI.29442
Groveport	OH 43125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	AVP Accounting	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.00	
Full Name of Individual (Last, First, Middle 3. Feldner, Cynthia, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 5367 Stotlz Ave		09 04 2019
City	State Zip Code	Transaction ID : SA11AI.29499
Groveport	OH 43125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) AVP Accounting	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
Full Name of Individual (Last, First, Middle C. Feldner, Cynthia, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 5367 Stotlz Ave		09 18 2019
City Groveport	State Zip Code 43125	Transaction ID : SA11AI.29541
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Ins. Co. Receipt For:	AVP Accounting	Payroll Deduction
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	285.00	
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 2019 City Zip Code State Transaction ID: SA11AI.29580 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AVP** Accounting Motorists Mutual Ins. Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 10 16 2019 City State Zip Code Transaction ID: SA11AI.29626 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction **AVP Accounting** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 315.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 10 30 2019 City State Zip Code Transaction ID: SA11AI.29668 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Co. **AVP Accounting** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 2019 11 13 City Zip Code State Transaction ID: SA11AI.29711 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AVP** Accounting Motorists Mutual Ins. Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 345.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 2019 11 City State Zip Code Transaction ID: SA11AI.29753 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction **AVP Accounting** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Feldner, Cynthia, , , Date of Receipt Mailing Address 5367 Stotlz Ave 11 2019 City State Zip Code Transaction ID: SA11AI.29796 OH Groveport 43125 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Co. **AVP Accounting** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional).....

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initi Feldner, Cynthia, , ,	ial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 5367 Stotlz Ave			12 24 2019
	City	State	Zip Code	Transaction ID : SA11AI.29838
	Groveport	ОН	43125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item
	Motorists Mutual Ins. Co.		Accounting	Payroll Deduction
	Receipt For:			- Tayron Boddollori
	Primary General	Aggregate Y	'ear-to-Date ▼	
	Other (specify) ▼		390.00	
В.	Full Name of Individual (Last, First, Middle Initi Fullenkamp, Joseph, P, ,	ial) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 3123 Summit Street			07 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.29321
	Columbus	ОН	43202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	15.00		
	Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occup Asst	pation (for Individual) VP	Memo Item Payroll Deduction
	Receipt For:	Aggregate Y	′ear-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
<u>_</u>	Full Name of Individual (Last, First, Middle Initi Fullenkamp, Joseph, P, ,	ial) or Full Orç	ganization Name	Date of Receipt
•	Mailing Address 3123 Summit Street			07 26 2019
	City	State	Zip Code	Transaction ID : SA11AI.29365
	Columbus	ОН	43202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employee (feet 1911)		and an Man Institute III	Memo Item
	Name of Employer (for Individual)		pation (for Individual)	Payroll Deduction
	Motorists Mutual Insurance Co.	Asst \		ayron Deduction
	Receipt For:	Aggregate Y	'ear-to-Date ▼	
	Other (specify)		225.00	
s	SUBTOTAL of Receipts This Page (optional)		>	45.00
Т	OTAL This Period (last page this line number of	only)		

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may no	ot be sold or used by any pess of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	PANY CIVIC FUND					
Full Name of Individual (Last, First, Middle I Fullenkamp, Joseph, P, ,	nitial) or Full Orgar	nization Name	Date of Receipt				
Mailing Address 3123 Summit Street			08 07 2019				
City	State OH	Zip Code 43202	Transaction ID : SA11AI.29411				
Columbus	OII	43202	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual)	Memo Item						
Motorists Mutual Insurance Co.	1	Payroll Deduction					
Receipt For: Primary General	Aggregate Yea	r-to-Date ▼					
Other (specify) ▼		240.00]				
Full Name of Individual (Last, First, Middle I 3. Fullenkamp , Joseph , P , ,	nitial) or Full Orgar	nization Name	Date of Receipt				
Mailing Address 3123 Summit Street			08 21 2019				
City	State	Zip Code	Transaction ID : SA11AI.29443				
Columbus	OH	43202	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual) Motorists Mutual Insurance Co.	Occupat Asst VP	tion (for Individual)	Memo Item Payroll Deduction				
Receipt For:	Aggregate Yea	ır-to-Date ▼					
Primary General Other (specify) ▼		255.00]				
Full Name of Individual (Last, First, Middle I C. Fullenkamp, Joseph, P, ,	nitial) or Full Orgar	nization Name	Date of Receipt				
Mailing Address 3123 Summit Street			09 04 2019				
City Columbus	State OH	Zip Code 43202	Transaction ID : SA11AI.29498				
		10202	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual)		ion (for Individual)	Memo Item				
Motorists Mutual Insurance Co. Receipt For:	Asst VP	_	Payroll Deduction				
Primary General	Aggregate Yea	r-to-Date ▼					
Other (specify)		270.00					
SUBTOTAL of Receipts This Page (optional))	45.00				
TOTAL This Period (last page this line numbe	r only)						

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

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

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\rangle	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAI	NCE COM	MPANY CIVIC FUND					
۸.	Full Name of Individual (Last, First, Middle Initial Fullenkamp, Joseph, P, , Mailing Address 3123 Summit Street City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) ▼	State OH	Zip Code 43202 ation (for Individual)	Date of Receipt M				
3.	Full Name of Individual (Last, First, Middle Initia Fullenkamp, Joseph, P, , Mailing Address 3123 Summit Street City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) Other (specify)	State OH C Occup Asst V Aggregate Ye	Zip Code 43202 ation (for Individual) /P ear-to-Date ▼ 300.00	Date of Receipt 10 02 2019 Transaction ID : SA11AI.29574 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction				
S.	Full Name of Individual (Last, First, Middle Initial Fullenkamp, Joseph, P, , Mailing Address 3123 Summit Street City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify)	State OH	Zip Code 43202 ation (for Individual)	Date of Receipt 10 16 2019 Transaction ID: SA11AI.29625 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction				
S	UBTOTAL of Receipts This Page (optional)		>	45.00				
Т	OTAL This Period (last page this line number or	nly)						

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fullenkamp, Joseph, P,, Date of Receipt Mailing Address 3123 Summit Street 2019 City Zip Code State Transaction ID: SA11AI.29667 OH Columbus 43202 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Asst VP Motorists Mutual Insurance Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fullenkamp, Joseph, P,, Date of Receipt Mailing Address 3123 Summit Street 13 2019 11 City State Zip Code Transaction ID: SA11AI.29710 OH Columbus 43202 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co. Payroll Deduction Asst VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 345.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fullenkamp, Joseph, P., Date of Receipt Mailing Address 3123 Summit Street 26 2019 City Zip Code State Transaction ID: SA11AI.29752 OH Columbus 43202 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Insurance Co. Asst VP Receipt For:

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

360.00

Aggregate Year-to-Date ▼

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle Initial) Fullenkamp, Joseph, P, , Mailing Address 3123 Summit Street	tial) or Full Organization Name	Date of Receipt				
City Columbus	State Zip Code OH 43202	12 11 2019 Transaction ID : SA11AI.29795				
FEC ID number of contributing federal political committee.	C 43202	Amount of Each Receipt this Period				
Name of Employer (for Individual) Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Asst VP Aggregate Year-to-Date ▼ 375.00	Memo Item Payroll Deduction				
Full Name of Individual (Last, First, Middle Inited Street) Fullenkamp, Joseph, P, , Mailing Address 3123 Summit Street	tial) or Full Organization Name	Date of Receipt				
City Columbus FEC ID number of contributing federal political committee.	State Zip Code 43202	Transaction ID : SA11AI.29837 Amount of Each Receipt this Period 15.00				
Name of Employer (for Individual) Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Asst VP Aggregate Year-to-Date ▼ 390.00	Memo Item Payroll Deduction				
Full Name of Individual (Last, First, Middle Initalian Candee, Stephen, , , Mailing Address 96 Pleasant Colony Dr	tial) or Full Organization Name	Date of Receipt 07 10 2019				
City Evans FEC ID number of contributing federal political committee.	State Zip Code 25241	Transaction ID : SA11AI.29335 Amount of Each Receipt this Period 15.00				
Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	Occupation (for Individual) AVP Aggregate Year-to-Date ▼ 210.00	Memo Item Payroll Deduction				
SUBTOTAL of Receipts This Page (optional)	>	45.00				
TOTAL This Period (last page this line number	only)					

Name of Employer (for Individual)

General

Brickstreet Insurance

Primary

Other (specify)

Receipt For:

Use separate schedule(s) for each category of the

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 2019 City Zip Code State Transaction ID: SA11AI.29379 Evans WV 25241 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 80 2019 City State Zip Code Transaction ID: SA11AI.29421 WV **Evans** 25241 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 2019 City Zip Code State Transaction ID: SA11AI.29444 WV Evans 25241 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item

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SUBTOTAL of Receipts This Page (optional)		•		,			,		45	5.00	
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255.00

Occupation (for Individual)

AVP

Aggregate Year-to-Date ▼

Payroll Deduction

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Any information copied from such Reports and or for commercial purposes, other than using	I Statements may not be sold or used by the name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY CIVIC F	UND
Full Name of Individual (Last, First, Middle Gandee, Stephen, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		09
City	State Zip Code	Transaction ID : SA11AI.29497
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Brickstreet Insurance	AVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		-
Other (specify) ▼	270.0	00
Full Name of Individual (Last, First, Middle 3. Gandee, Stephen, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		M M / D D / Y Y Y Y
		09 18 2019
City	State Zip Code	Transaction ID : SA11AI.29539
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	285.0	00
Full Name of Individual (Last, First, Middle Gandee, Stephen, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		10 02 / 2019
City	State Zip Code	Transaction ID : SA11AI.29594
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Brickstreet Insurance	AVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	300.0	00
SUBTOTAL of Receipts This Page (optional).	-	45.00
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 2019 16 City Zip Code State Transaction ID: SA11AI.29624 Evans WV 25241 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AVP Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 10 2019 City State Zip Code Transaction ID: SA11AI.29666 WV **Evans** 25241 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gandee, Stephen, , , Date of Receipt Mailing Address 96 Pleasant Colony Dr 13 2019 City Zip Code State Transaction ID: SA11AI.29709 WV Evans 25241 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Brickstreet Insurance AVP Receipt For: Aggregate Year-to-Date ▼ Primary General 345.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports a or for commercial purposes, other than using	and Statements may not be sold or used by any peg the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	URANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middl Gandee, Stephen, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		11 26 2019
City	State Zip Code	Transaction ID : SA11AI.29751
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Brickstreet Insurance	AVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	360.00	
Full Name of Individual (Last, First, Middl 3. Gandee, Stephen, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		M M / D D / Y Y Y Y
		12 11 2019
City	State Zip Code	Transaction ID : SA11AI.29794
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name of Individual (Last, First, Middle). Gandee, Stephen, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 96 Pleasant Colony Dr		12 24 2019
City	State Zip Code	Transaction ID : SA11AI.29836
Evans	WV 25241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
		Mama Itam
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Brickstreet Insurance Receipt For:	AVP	Payroll Deduction
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	390.00	
SUBTOTAL of Receipts This Page (optional	al)	45.00
TOTAL This Period (last page this line num	nber only)	1 1 40 1 1 40 1 1 40

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gilmore, Amy, , , Date of Receipt Mailing Address 3500 Leap Rd. 2019 10 City State Zip Code Transaction ID: SA11AI.29298 Hilliard OH 43026 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Payroll Deduction Motorists Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gilmore, Amy, , , Date of Receipt Mailing Address 3500 Leap Rd. 07 2019 City State Zip Code Transaction ID: SA11AI.29344 Hilliard ОН 43026 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00

Full Name of Individual (Last, First, Middle Ir Gilmore, Amy, , ,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 3500 Leap Rd.			08 07 2019
City	State	Zip Code	Transaction ID : SA11AI.29392
Hilliard	ОН	43026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Insurance Group	VP		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 400.00	
			75.00

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

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) ∨P Aggregate Year-to-Date ▼ 425.00	Date of Receipt 08 21 2019 Transaction ID: SA11AI.29445 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle I	State Zip Code OH 43026 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 450.00	Date of Receipt M M M / Q019 Transaction ID: SA11Al.29496 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 475.00	Date of Receipt M M M / D B / Y 2019 Transaction ID: SA11AI.29538 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	·····	75.00
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	the name and add	dress of any political committed	person for the purpose of soliciting contributions be to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City	Initial) or Full Org	anization Name	Date of Receipt 10 02 2019 Transaction ID: SA11AI.29586
FEC ID number of contributing federal political committee.	ОН	43026	Amount of Each Receipt this Period 25.00 Memo Item
Name of Employer (for Individual) Motorists Insurance Group Receipt For: □ Primary □ General □ Other (specify) ▼	VP	ation (for Individual) ear-to-Date ▼ 500.00	Payroll Deduction
Full Name of Individual (Last, First, Middle Gilmore, Amy, , , Mailing Address 3500 Leap Rd.	Initial) or Full Org	anization Name	Date of Receipt 10 16 2019
City Hilliard FEC ID number of contributing federal political committee.	State OH	Zip Code 43026	Transaction ID : SA11Al.29623 Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼	Occup VP Aggregate Ye	ear-to-Date ▼	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Gilmore, Amy, , , Mailing Address 3500 Leap Rd.	Initial) or Full Org	anization Name	Date of Receipt
City Hilliard FEC ID number of contributing federal political committee.	State OH	Zip Code 43026	Transaction ID : SA11Al.29665 Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	Occup VP Aggregate Ye	ation (for Individual) ear-to-Date ▼ 550.00	Payroll Deduction
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)			75.00

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NAME OF COMMITTEE (In Full)	ANCE COMPANY CIVIC FUND	S SOME SOME IDEASONS HOME SUCH COMMINICION.
Full Name of Individual (Last, First, Middle In Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) VP Aggregate Year-to-Date 575.00	Date of Receipt 11 13 2019 Transaction ID: SA11Al.29708 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 600.00	Date of Receipt 11 26 2019 Transaction ID: SA11AI.29750 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) VP Aggregate Year-to-Date ▼	Date of Receipt 12 11 2019 Transaction ID: SA11AI.29793 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	75.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	
Full Name of Individual (Last, First, Middle Gilmore, Amy, , , Mailing Address 3500 Leap Rd. City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)		Date of Receipt 12 24 2019 Transaction ID : SA11AI.29835 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , , Mailing Address 3128 Ellis Place City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	State Zip Code OH 43204 C Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date 210.00	Date of Receipt 07 10 2019 Transaction ID : SA11Al.29302 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , , Mailing Address 3128 Ellis Place City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43204 C Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date 225.00	Date of Receipt M 07 26 2019 Transaction ID : SA11AI.29346 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional	ber only)	55.00

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMP	PANY CIVIC FUND					
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , , Mailing Address 3128 Ellis Place	Initial) or Full Organiz	zation Name	Date of Receipt 08 07 2019				
City	State	Zip Code	Transaction ID : SA11AI.29394				
Columbus	OH	43204	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual) Motorists Mutual Ins. Company	'	on (for Individual) conal Lines Underwriting	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 240.00					
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , , Mailing Address 3128 Ellis Place	Initial) or Full Organiz	zation Name	Date of Receipt				
City	Ctoto	Zin Codo	08 21 2019				
City Columbus	State Z	Zip Code 43204	Transaction ID : SA11AI.29446 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	EC ID number of contributing						
Name of Employer (for Individual) Motorists Mutual Ins. Company		on (for Individual) sonal Lines Underwriting	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 255.00					
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , ,	Initial) or Full Organiz	zation Name	Date of Receipt				
Mailing Address 3128 Ellis Place City	State	Zip Code	09 04 2019 Transaction ID : SA11Al.29495				
Columbus	OH	43204	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual) Motorists Mutual Ins. Company		on (for Individual) onal Lines Underwriting	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 270.00					
SUBTOTAL of Receipts This Page (optional).		>	45.00				
TOTAL This Period (last page this line numb	er only)						

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold the name and address of any	or used by any person political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY	CIVIC FUND	
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , ,	Initial) or Full Organization Na	nme	Date of Receipt
Mailing Address 3128 Ellis Place		09 18 2019	
City Columbus		Transaction ID : SA11AI.29537	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	dividual) ss Underwriting 285.00	Memo Item Payroll Deduction	
Full Name of Individual (Last, First, Middle Graham, Elizabeth, , , Mailing Address 3128 Ellis Place	, ,		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbus	State Zip Code OH 43204		Transaction ID : SA11AI.29577 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Inc	,	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	300.00	
Full Name of Individual (Last, First, Middle C. Graham, Elizabeth, , ,	Initial) or Full Organization Na	ıme	Date of Receipt
Mailing Address 3128 Ellis Place			10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbus	State Zip Code OH 43204		Transaction ID : SA11AI.29622 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Inc	,	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	315.00	
SUBTOTAL of Receipts This Page (optional)		>	45.00
TOTAL This Period (last page this line numb	er only)		

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	Statements may not be sold or used by any per name and address of any political committee					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle In Graham, Elizabeth, , , Mailing Address 3128 Ellis Place City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	Date of Receipt 10 30 2019 Transaction ID: SA11AI.29664 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction					
Full Name of Individual (Last, First, Middle In Graham, Elizabeth, , , Mailing Address 3128 Ellis Place City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43204 C Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date ▼ 345.00	Date of Receipt 11 13 2019 Transaction ID : SA11Al.29707 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction				
Full Name of Individual (Last, First, Middle In Graham, Elizabeth, , , Mailing Address 3128 Ellis Place City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43204 C Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date 360.00	Date of Receipt 11				
SUBTOTAL of Receipts This Page (optional)	>	45.00				
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND						
Full Name of Individual (Last, First, Middle Init Graham, Elizabeth, , , Mailing Address 3128 Ellis Place	tial) or Full Organization Name	Date of Receipt					
City Columbus	State Zip Code OH 43204	12 11 2019 Transaction ID : SA11AI.29791 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů (,						
Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date ▼ 375.00	Memo Item Payroll Deduction					
Full Name of Individual (Last, First, Middle Inita.) Graham, Elizabeth, , , Mailing Address 3128 Ellis Place	tial) or Full Organization Name	Date of Receipt					
City Columbus FEC ID number of contributing federal political committee.	State Zip Code 43204	Transaction ID : SA11AI.29834 Amount of Each Receipt this Period 15.00					
Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) AVP Personal Lines Underwriting Aggregate Year-to-Date ▼ 390.00	Memo Item Payroll Deduction					
Full Name of Individual (Last, First, Middle Init C. Griffin, Archie, , , Mailing Address 6845 Temperance Point Place	•	Date of Receipt 10 31 2019					
City Westerville FEC ID number of contributing federal political committee.	State Zip Code 43082	Transaction ID : SA11AI.29868 Amount of Each Receipt this Period 250.00					
Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	Occupation (for Individual) Director Aggregate Year-to-Date ▼ 250.00	Memo Item Payroll Deduction					
SUBTOTAL of Receipts This Page (optional)		280.00					
TOTAL This Period (last page this line number	only)						

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Griffin, Archie, , , Date of Receipt Mailing Address 6845 Temperance Point Place 2019 11 18 City State Zip Code Transaction ID: SA11AI.29861 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Motorists Mutual Ins. Co. Director Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 07 10 2019 City State Zip Code Transaction ID: SA11AI.29313 Westerville OH 43082 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Payroll Deduction Asst. VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 \triangle

	4		
Full Name of Individual (Last, First, Middle Guanciale, Dino, , ,	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 4819 St. Andrews Circle			07 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29357
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Mutual Ins Co.	Asst. V	,	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional).			280.00

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

FOR LINE NUMBER:						PAGE		33	OF	186
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 2019 City State Zip Code Transaction ID: SA11AI.29404 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Asst. VP Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 2019 City State Zip Code Transaction ID: SA11AI.29447 Westerville OH 43082 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Payroll Deduction Asst. VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 04 2019 City State Zip Code Transaction ID: SA11AI.29494 ОН Westerville 43082 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify)	Occupation (for Individual) Asst. VP Aggregate Year-to-Date ▼ 270.00	Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	only)	FEC Schedule A (Form 3X) Rev. 06/

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 18 2019 City State Zip Code Transaction ID: SA11AI.29536 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Asst. VP Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 285.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Guanciale, Dino, , , Date of Receipt Mailing Address 4819 St. Andrews Circle 10 2019 City State Zip Code Transaction ID: SA11AI.29575 Westerville OH 43082 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Payroll Deduction Asst. VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00

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Full Name of Individual (Last, First, Middle In Guanciale, Dino, , ,	itial) or Full Org	ganization Name	Date of Receipt
Mailing Address 4819 St. Andrews Circle			10 16 2019
City	State	Zip Code	Transaction ID : SA11AI.29621
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Motorists Mutual Ins Co.	Asst.	VP	Payroll Deduction
Receipt For: Primary General Other (specify)			
NIDTOTAL of Bassista This Bass (autisms)			45.00

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND)
Full Name of Individual (Last, First, Middle I Guanciale, Dino, , , Mailing Address 4819 St. Andrews Circle City Westerville	nitial) or Full Organization Name State Zip Code OH 43082	Date of Receipt 10 30 2019 Transaction ID : SA11Al.29663 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Asst. VP Aggregate Year-to-Date ▼ 330.00	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Guanciale, Dino, , , Mailing Address 4819 St. Andrews Circle City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Asst. VP Aggregate Year-to-Date ▼ 345.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle I Guanciale, Dino, , , Mailing Address 4819 St. Andrews Circle City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Asst. VP Aggregate Year-to-Date ▼ 360.00	Date of Receipt 11 26 2019 Transaction ID: SA11AI.29748 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional))	45.00
TOTAL This Period (last page this line number	er only)	·

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	nd Statements may not be sold or used by any pg the name and address of any political committee				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	JRANCE COMPANY CIVIC FUND)			
Full Name of Individual (Last, First, Middle Guanciale, Dino, , ,	e Initial) or Full Organization Name	Date of Receipt			
Mailing Address 4819 St. Andrews Circle		12 11 2019			
City	State Zip Code	Transaction ID : SA11AI.29790			
Westerville	OH 43082	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	15.00			
Name of Employer (for Individual) Motorists Mutual Ins Co.	Occupation (for Individual) Asst. VP	Memo Item Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼	1 dyron Doddollori			
Primary General Other (specify) ▼	375.00				
Full Name of Individual (Last, First, Middle Guanciale, Dino, , ,	e Initial) or Full Organization Name	Date of Receipt			
Mailing Address 4819 St. Andrews Circle		12 24 2019			
City	State Zip Code OH 43082	Transaction ID : SA11AI.29833 Amount of Each Receipt this Period			
Westerville	1.0002				
FEC ID number of contributing federal political committee.	15.00				
Name of Employer (for Individual) Motorists Mutual Ins Co.	Occupation (for Individual) Asst. VP	Memo Item Payroll Deduction			
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	390.00				
Full Name of Individual (Last, First, Middle Hall, Marc S., , ,	e Initial) or Full Organization Name	Date of Receipt			
Mailing Address 5999 Lane Road		07 10 2019			
City Centerburg	State Zip Code OH 43011	Transaction ID : SA11AI.29327 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	15.00			
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Individual) Assist. V. P.	Memo Item Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	210.00				
SUBTOTAL of Receipts This Page (optional	l)	45.00			
TOTAL This Period (last page this line num	ber only)				

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Hall, Marc S., , , Mailing Address 5999 Lane Road City Centerburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43011 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼ 225.00	Date of Receipt 07 26 2019 Transaction ID: SA11AI.29371 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Hall, Marc S., , , Mailing Address 5999 Lane Road City Centerburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) Other (specify)	State Zip Code OH 43011 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D / 2019 Transaction ID: SA11Al.29415 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Hall, Marc S., , , Mailing Address 5999 Lane Road City Centerburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code OH 43011 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional).	·····	45.00
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIVIC F	FUND
Full Name of Individual (Last, First, Middle Hall, Marc S., , , Mailing Address 5999 Lane Road	nitial) or Full Organization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11Al.29493
Centerburg	OH 43011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Individual) Assist. V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270	.00
Full Name of Individual (Last, First, Middle Hall, Marc S., , , Mailing Address 5999 Lane Road	nitial) or Full Organization Name	Date of Receipt
		09 18 2019
City	State Zip Code	Transaction ID : SA11AI.29535
Centerburg	OH 43011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Individual) Assist. V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285	.00
Full Name of Individual (Last, First, Middle Last, First, Middle L	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5999 Lane Road		10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Centerburg	State Zip Code OH 43011	Transaction ID : SA11AI.29555
FEC ID number of contributing federal political committee.	C 43011	Amount of Each Receipt this Period 15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (for Individual) Assist. V. P.	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	. 3,.5 2000000
Primary General Other (specify)	300	.00
SUBTOTAL of Receipts This Page (optional).		45.00
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Use separate schedule(s) for each category of the Detailed Summary Page (check

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Marc S., , , Date of Receipt Mailing Address 5999 Lane Road 2019 16 City Zip Code State Transaction ID: SA11AI.29620 OH Centerburg 43011 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Assist. V. P. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hall, Marc S., , , Date of Receipt Mailing Address 5999 Lane Road 10 2019 City State Zip Code Transaction ID: SA11AI.29662 OH Centerburg 43011 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hall, Marc S., , , Date of Receipt Mailing Address 5999 Lane Road 13 2019 City State Zip Code Transaction ID: SA11AI.29705 OH Centerburg 43011 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 345.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional).....

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7

Primary

B.

Other (specify)

General

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Marc S., , , Date of Receipt Mailing Address 5999 Lane Road 2019 11 City State Zip Code Transaction ID: SA11AI.29747 OH Centerburg 43011 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Assist. V. P. Payroll Deduction Receipt For:

Aggregate Year-to-Date ▼

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

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Full Name of Individual (Last, First, Middle II Hall, Marc $S., , ,$	nitial) or Full Org	ganization Name	Date of Receipt			
Mailing Address 5999 Lane Road	12 11 2019					
City	State	Zip Code	Transaction ID : SA11AI.29789			
Centerburg	ОН	43011	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		15.00			
Name of Employer (for Individual) Motorists Mutual Ins. Company		pation (for Individual) st. V. P.	Memo Item Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	of For: Aggregate Year-to-Date ▼ Primary General					
Full Name of Individual (Last First Middle II	nitial) or Full Ord	ranization Name				

Hall, Marc S., , , Date of Receipt Mailing Address 5999 Lane Road 24 2019 City State Zip Code Transaction ID: SA11AI.29832 ОН Centerburg 43011 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify)

45.00

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	Statements may not be sold or used by any perse e name and address of any political committee t	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Harbrecht, Sandra, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 10 North Hight Street		11 18 2019
City	State Zip Code	Transaction ID : SA11AI.29862
Columbus	OH 43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Director	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle In Henderson, Thomas, J., ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive		07 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.29319
Pickerington	OH 43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Assist. V. P., Claims	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle In Henderson, Thomas, J., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive		07 26 2019
City	State Zip Code	Transaction ID : SA11AI.29363
Pickerington	OH 43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Assist. V. P., Claims	Memo Item 7/26/2019
Receipt For:	· ·	1
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	225.00	
SUBTOTAL of Receipts This Page (optional)		1030.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COM	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Henderson, Thomas, J., , Mailing Address 9725 Wagonwood Drive	nitial) or Full Organ	ization Name	Date of Receipt
			08 07 2019
City	State	Zip Code	Transaction ID: SA11AI.29410
Pickerington	ОН	43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	'	on (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Assist. V	. P., Claims	8/7/19
Receipt For: Primary General	Aggregate Year	r-to-Date ▼	
Other (specify) ▼	1.5	240.00	
Full Name of Individual (Last, First, Middle In Henderson, Thomas, J., ,	nitial) or Full Organ	ization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive			08 21 2019
City	State OH	Zip Code	Transaction ID : SA11AI.29449
Pickerington	OH	43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.		ion (for Individual) /. P., Claims	Memo Item 8/7/19
Receipt For:	Aggregate Year	r-to-Date ▼	
Primary General Other (specify) ▼	4	255.00	
Full Name of Individual (Last, First, Middle In Henderson, Thomas, J., ,	nitial) or Full Organ	ization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive			09 04 2019
City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.29492
FEC ID number of contributing		1 1 1 1 1	Amount of Each Receipt this Period
federal political committee.	C		15.00
Name of Employer (for Individual)		on (for Individual)	Memo Item
Motorists Mutual Ins. Co. Receipt For:	T '	. P., Claims	8/7/19
Primary General	Aggregate Yea	r-to-Date ▼	
Other (specify)		270.00	
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line numbe	r only)		

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ini Henderson, Thomas, J., , Mailing Address 9725 Wagonwood Drive	itial) or Full Organization Name	Date of Receipt
City	State Zip Code	09 18 2019
Pickerington	OH 43147	Transaction ID : SA11AI.29534 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Assist. V. P., Claims	Memo Item 8/7/19
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	
Full Name of Individual (Last, First, Middle Ini Henderson, Thomas, J., , Mailing Address 9725 Wagonwood Drive	tial) or Full Organization Name	Date of Receipt
City Pickerington	State Zip Code OH 43147	10 02 2019 Transaction ID : SA11Al.29572 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Assist. V. P., Claims	Memo Item 8/7/19
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300,00	
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive		10 16 2019
City Pickerington	State Zip Code OH 43147	Transaction ID : SA11AI.29619 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Assist. V. P., Claims	Memo Item 8/7/19
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optional)	>	45.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Henderson, Thomas, J., ,	nitial) or Full Orgar	nization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive			10 30 2019
City	State	Zip Code	Transaction ID : SA11AI.29661
Pickerington	ОН	43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupat	ion (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Assist. \	/. P., Claims	8/7/19
Receipt For:	Aggregate Yea	r-to-Date ▼	
Primary General Other (specify) ▼		330.00	
Full Name of Individual (Last, First, Middle I Henderson, Thomas, J., ,	nitial) or Full Orgar	nization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive			11 13 2019
City	State	Zip Code	Transaction ID : SA11AI.29704
Pickerington	ОП	43147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.		tion (for Individual) V. P., Claims	Memo Item 8/7/19
Receipt For:	Aggregate Yea	r-to-Date ▼	
Primary General Other (specify) ▼	4	345.00	
Full Name of Individual (Last, First, Middle I C. Henderson, Thomas, J., ,	nitial) or Full Orgar	nization Name	Date of Receipt
Mailing Address 9725 Wagonwood Drive			11 26 2019
City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.29746
FEC ID number of contributing		40147	Amount of Each Receipt this Period
federal political committee.	C		15.00
Name of Employer (for Individual)		ion (for Individual)	Memo Item
Motorists Mutual Ins. Co. Receipt For:		/. P., Claims	8/7/19
Primary General	Aggregate Yea	r-to-Date ▼	
Other (specify)		360.00	
SUBTOTAL of Receipts This Page (optional)			45.00
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Henderson, Thomas, J.,, Date of Receipt Mailing Address 9725 Wagonwood Drive 2019 City Zip Code State Transaction ID: SA11AI.29788 Pickerington OH 43147 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assist. V. P., Claims Motorists Mutual Ins. Co. 8/7/19 Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Henderson, Thomas, J., , Date of Receipt Mailing Address 9725 Wagonwood Drive 12 2019 City State Zip Code Transaction ID: SA11AI.29831 OH Pickerington 43147 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. 8/7/19 Assist. V. P., Claims Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 390.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hennen, Kirk, , , Date of Receipt Mailing Address 2860 Wynridge Drive 10 2019 City State Zip Code Transaction ID: SA11AI.29324 OH Grove City 43123 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Insurance Co AVP, Sales - West Zone Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may in a name and addr	not be sold or used by any pe ress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (IN Full) MOTORISTS MUTUAL INSURA	ANCE COM	MPANY CIVIC FUND				
Full Name of Individual (Last, First, Middle Ini Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit S		anization Name	Date of Receipt			
·		I	07 10 2019			
Columbus	State OH	Zip Code	Transaction ID : SA11AI.29306			
Columbus	J11	43215	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		50.00			
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item			
Motorists Insurance	EVP		Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 700.00				
Full Name of Individual (Last, First, Middle Ini Howat, James, Christopher, ,		anization Name	Date of Receipt			
Mailing Address 250 Daniel Burnham Sq Unit 5		7:0 0-1-	07 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11Al.29350 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	EC ID number of contributing					
Name of Employer (for Individual) Motorists Insurance	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 750.00				
Full Name of Individual (Last, First, Middle Ini	itial) or Full Orga	anization Name	Date of Receipt			
Mailing Address 250 Daniel Burnham Sq Unit	504		08 07 2019			
City	State	Zip Code	Transaction ID : SA11AI.29398			
Columbus	OH	43215	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) Motorists Insurance	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction			
Receipt For:	Aggregate Yea	ar-to-Date ▼				
Primary General Other (specify)	Aggregate 16	800.00				
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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initia Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit 50		anization Name	Date of Receipt
	City	State	Zip Code	08 21 2019 Transaction ID : SA11Al.29450
	Columbus	ОН	43215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Motorists Insurance	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 850.00	
В.	Full Name of Individual (Last, First, Middle Initia Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit 50		anization Name	Date of Receipt
				09 04 2019
	City	State	Zip Code	Transaction ID : SA11AI.29491
	Columbus FEC ID number of contributing federal political committee.	С	43215	Amount of Each Receipt this Period 50.00
	Name of Employer (for Individual) Motorists Insurance	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Howat, James, Christopher, ,	al) or Full Org	anization Name	Date of Receipt
	Mailing Address 250 Daniel Burnham Sq Unit 50			09 18 2019
	City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29533 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Motorists Insurance	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 950.00	
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Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not the name and address	ot be sold or used by any peess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	IRANCE COM	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Howat, James, Christopher, ,		nization Name	Date of Receipt
Mailing Address 250 Daniel Burnham Sq U	nit 504		10 02 7 2019
City	State OH	Zip Code	Transaction ID : SA11AI.29595
Columbus	OH	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) Motorists Insurance	Occupat EVP	ion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq U		nization Name	Date of Receipt
			10 16 2019
City	State	Zip Code	Transaction ID : SA11AI.29618
Columbus	OH	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) Motorists Insurance	Occupat EVP	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 1050.00	
Full Name of Individual (Last, First, Middle C. Howat, James, Christopher, ,	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 250 Daniel Burnham Sq U	nit 504		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29660 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance	Occupat EVP	ion (for Individual)	Memo Item Payroll Deduction
Receipt For:	Aggregate Yea	r-to-Date ▼	
Primary General Other (specify)		1100.00	
SUBTOTAL of Receipts This Page (optional))		150.00
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 11 13 2019 City Zip Code State Transaction ID: SA11AI.29703 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 2019 11 City State Zip Code Transaction ID: SA11AI.29745 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1200.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 11 2019 City Zip Code State Transaction ID: SA11AI.29787 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance **EVP** Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 2019 City Zip Code State Transaction ID: SA11AI.29830 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Huntington, Henry, L, , Date of Receipt Mailing Address 7290 Pleasant Street 18 2019 11 City State Zip Code Transaction ID: SA11AI.29865 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Payroll Deduction Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Jeffers, Dan, E., Mr., Date of Receipt Mailing Address 6401 Rossmore Lane 10 2019 City State Zip Code Transaction ID: SA11AI.29310 OH Canal Winchester 43110 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins Company Assist. V. P. Receipt For:

1065.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

210.00

Aggregate Year-to-Date ▼

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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Jeffers, Dan, E., Mr., Mailing Address 6401 Rossmore Lane	nitial) or Full Orga	nization Name	Date of Receipt
Cit.	Otot-	7in Code	07 26 2019
City Canal Winchester	State OH	Zip Code 43110	Transaction ID : SA11AI.29354
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupa Assist.	tion (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 225.00	
Full Name of Individual (Last, First, Middle II Jeffers, Dan, E., Mr., Mailing Address 6401 Rossmore Lane	nitial) or Full Orga	nization Name	Date of Receipt
City Canal Winchester	State OH	Zip Code 43110	08 07 2019 Transaction ID : SA11Al.29402 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupa Assist.	tion (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle I	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane	lo:		08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Canal Winchester	State OH	Zip Code 43110	Transaction ID : SA11AI.29451
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupati Assist. \	tion (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 255.00	
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line numbe	er only)		

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

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not ne name and address	be sold or used by any pe s of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMP	ANY CIVIC FUND	
Full Name of Individual (Last, First, Middle II) Jeffers, Dan, E., Mr.,	nitial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			09 04 2019
City	State Z	ip Code	Transaction ID : SA11AI.29490
Canal Winchester	OH	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupation	n (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist. V.	P.	Payroll Deduction
Receipt For: Primary General	Aggregate Year-t	o-Date ▼	
Other (specify) ▼		270.00	
Full Name of Individual (Last, First, Middle II	nitial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			09 18 2019
City		ip Code	Transaction ID : SA11AI.29532
Canal Winchester	OH	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupation Assist. V.	n (for Individual) P.	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-t	o-Date ▼	
Primary General Other (specify) ▼		285.00	
Full Name of Individual (Last, First, Middle II	nitial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Canal Winchester		ip Code 43110	Transaction ID : SA11AI.29568 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupation	n (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist. V. I	,	Payroll Deduction
Receipt For:	Aggregate Year-t	o-Date ▼	
Primary General Other (specify)	4	300.00	
SUBTOTAL of Receipts This Page (optional)		>	45.00
TOTAL This Period (last page this line numbe	r only)		

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may no he name and addres	ot be sold or used by any pe ss of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMP	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Jeffers, Dan, E., Mr.,	nitial) or Full Organi	ization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			10 16 2019
City		Zip Code	Transaction ID : SA11AI.29617
Canal Winchester	OH	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist. V	. P.	Payroll Deduction
Receipt For:	Aggregate Year	-to-Date ▼	
Primary General	33 13		
Other (specify) ▼		315.00	
Full Name of Individual (Last, First, Middle I B. Jeffers, Dan, E., Mr.,	nitial) or Full Organi	ization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			M M / D D / Y Y Y Y
			10 30 2019
City		Zip Code	Transaction ID : SA11AI.29659
Canal Winchester	ОН	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupation Assist. V	on (for Individual)	Memo Item Payroll Deduction
Receipt For:	Aggregate Year	-to-Date ▼	
Primary General Other (specify) ▼		330.00	
Full Name of Individual (Last, First, Middle I	nitial) or Full Organi	ization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			11 13 2019
City	State	Zip Code	Transaction ID : SA11AI.29702
Canal Winchester	ОН	43110	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		15.00
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist. V.	. P.	Payroll Deduction
Receipt For:	Aggregate Year	-to-Date ▼	
Primary General		345.00	
Other (specify)	4	345.00	
SUBTOTAL of Receipts This Page (optional)		·····	45.00
TOTAL This Period (last page this line numbe	er only)		

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Jeffers, Dan, E., Mr., Mailing Address 6401 Rossmore Lane	nitial) or Full Orga	nization Name	Date of Receipt
011	10: :	7: 0 !	11 26 2019
City Canal Winchester	State OH	Zip Code 43110	Transaction ID : SA11AI.29744
		+3110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist.	V. P.	Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼		360.00	
Full Name of Individual (Last, First, Middle In Jeffers, Dan, E., Mr.,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane	Ohat -	7in Code	12 11 2019
City Canal Winchester	State OH	Zip Code	Transaction ID : SA11AI.29786
Canal Winchester	Un	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupa Assist.	tion (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼	4	375.00	
Full Name of Individual (Last, First, Middle In	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6401 Rossmore Lane			12 24 2019
City	State	Zip Code	Transaction ID : SA11AI.29829
Canal Winchester	ОН	43110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Mutual Ins Company	Assist.	V. P.	Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify)	1	390.00	
SUBTOTAL of Receipts This Page (optional)		>	45.00
TOTAL This Period (last page this line number	only)		

Use separate schedule(s) for each category of the

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 2019 10 City Zip Code State Transaction ID: SA11AI.29311 OH Worthington 43235 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Executive VP & COO Motorists Mutual Ins Co Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 07 2019 City State Zip Code Transaction ID: SA11AI.29355 Worthington OH 43235 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co Payroll Deduction Executive VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 07 2019 City State Zip Code Transaction ID: SA11AI.29403 OH Worthington 43235 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins Co Executive VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify)

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

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

300.00

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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold on the name and address of any positions.	r used by any persor olitical committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY C	IVIC FUND					
Full Name of Individual (Last, First, Middle Kaufman, David L., , , Mailing Address 7925 Greenside Lane	ne	Date of Receipt					
	08 21 2019						
City	State Zip Code 43235	_	Transaction ID : SA11AI.29452				
Worthington	OH 43235		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual)	Occupation (for Indiv	vidual)	Memo Item				
Motorists Mutual Ins Co	Executive VP & COC)	Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	7 7	1700.00					
Full Name of Individual (Last, First, Middle Kaufman, David L. , , ,	nitial) or Full Organization Nam	ne	Date of Receipt				
Mailing Address 7925 Greenside Lane							
City	State Zip Code 43235	_	Transaction ID : SA11AI.29489				
Worthington		Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Indiv Executive VP & COO	, , , , , , , , , , , , , , , , , , ,	Memo Item Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼		1800.00					
Full Name of Individual (Last, First, Middle C. Kaufman, David L., , ,	nitial) or Full Organization Nam	ne	Date of Receipt				
Mailing Address 7925 Greenside Lane			09 18 2019				
City Worthington	State Zip Code 43235		Transaction ID : SA11AI.29531 Amount of Each Receipt this Period				
FEC ID number of contributing							
federal political committee.	C		100.00				
Name of Employer (for Individual)	Occupation (for Indiv	, , , , , , , , , , , , , , , , , , ,	Memo Item				
Motorists Mutual Ins Co Receipt For:	Executive VP & COC)	Payroll Deduction				
Primary General	Aggregate Year-to-Date ▼						
Other (specify)		1900.00					
SUBTOTAL of Receipts This Page (optional).			300.00				
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Use separate schedule(s) for each category of the

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 2019 City Zip Code State Transaction ID: SA11AI.29556 OH Worthington 43235 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Executive VP & COO Motorists Mutual Ins Co Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 10 16 2019 City State Zip Code Transaction ID: SA11AI.29616 Worthington OH 43235 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co Payroll Deduction Executive VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 10 30 2019 City State Zip Code Transaction ID: SA11AI.29658 OH Worthington 43235 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins Co Executive VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND				
Full Name of Individual (Last, First, Middle In Kaufman, David L., , , Mailing Address 7925 Greenside Lane	Date of Receipt				
	State Zip Code	11 13 2019			
City Worthington	State Zip Code OH 43235	Transaction ID : SA11AI.29701 Amount of Each Receipt this Period 100.00			
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Motorists Mutual Ins Co	Executive VP & COO	Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00				
Full Name of Individual (Last, First, Middle In Kaufman, David L., , , Mailing Address 7925 Greenside Lane	nitial) or Full Organization Name	Date of Receipt			
		11 26 2019			
City	State Zip Code OH 43235	Transaction ID : SA11AI.29743			
Worthington	OH 43235	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Individual) Executive VP & COO	Memo Item Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00				
Full Name of Individual (Last, First, Middle In Kaufman, David L., , ,	nitial) or Full Organization Name	Date of Receipt			
Mailing Address 7925 Greenside Lane		12 11 2019			
City	State Zip Code	Transaction ID : SA11Al.29785			
Worthington	OH 43235	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ě				
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Individual) Executive VP & COO	Memo Item Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	2500.00				
SUBTOTAL of Receipts This Page (optional)	•	300.00			
TOTAL This Period (last page this line number	only)				

Receipt For:

C.

Primary

General

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, David L., , , Date of Receipt Mailing Address 7925 Greenside Lane 2019 City State Zip Code Transaction ID: SA11AI.29828 Worthington OH 43235 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co Executive VP & COO Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 07 10 2019 City State Zip Code Transaction ID: SA11AI.29322 ОН 43031 Johnstown Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. VP and CIO Payroll Deduction

Other (specify) ▼	4	280.00	
Full Name of Individual (Last, First, Middle In Kessler, John C., , , Mailing Address 3910 Caswell Road	itial) or Full Org	anization Name	Date of Receipt
City Johnstown	State OH	Zip Code 43031	7 26 2019 Transaction ID : SA11AI.29366 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	VP and	d CIO	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 300.00	
NIDTOTAL of Descints This Daws (autional)			140.00

Aggregate Year-to-Date ▼

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 2019 City Zip Code State Transaction ID: SA11AI.29412 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP and CIO Motorists Mutual Ins. Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 2019 City State Zip Code Transaction ID: SA11AI.29453 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction VP and CIO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 04 2019 City Zip Code State Transaction ID: SA11AI.29488 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Co. VP and CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 2019 18 City Zip Code State Transaction ID: SA11AI.29530 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP and CIO Motorists Mutual Ins. Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 10 2019 City State Zip Code Transaction ID: SA11AI.29559 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Payroll Deduction VP and CIO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 16 2019 City State Zip Code Transaction ID: SA11AI.29615 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing

Receipt For:

C.

Primary

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 2019 City State Zip Code Transaction ID: SA11AI.29657 OH Johnstown 43031 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Motorists Mutual Ins. Co. VP and CIO Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kessler, John C., , , Date of Receipt Mailing Address 3910 Caswell Road 11 2019 City State Zip Code Transaction ID: SA11AI.29700 OH 43031 Johnstown Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. VP and CIO Payroll Deduction

Other (specify) ▼		460.00	
Full Name of Individual (Last, First, Middle Kessler, John C., , , Mailing Address 3910 Caswell Road	Initial) or Full Org	zanization Name	Date of Receipt 11 26 2019 Transaction ID: SA11Al.29742
Johnstown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For:	OH C Occup	ation (for Individual) d CIO ear-to-Date ▼	Amount of Each Receipt this Period 20.00 Memo Item Payroll Deduction
Other (specify) SUBTOTAL of Receipts This Page (optional).		480.00	60.00

Aggregate Year-to-Date ▼

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

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Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Kessler, John C., , , Mailing Address 3910 Caswell Road	Initial) or Full Orga	anization Name	Date of Receipt
City	State	Zip Code	12 11 2019
Johnstown	OH	43031	Transaction ID : SA11AI.29784 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	VP and		Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle Kessler, John C., , , Mailing Address 3910 Caswell Road	Initial) or Full Orga	anization Name	Date of Receipt 12 24 2019
City Johnstown	State OH	Zip Code 43031	Transaction ID : SA11Al.29827 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupa VP and	ation (for Individual) d CIO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 520.00	
Full Name of Individual (Last, First, Middle King, Teresa M., , ,	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 1139 Tidewater Court City	State	Zip Code	07 10 2019 Transaction ID : SA11Al.29338
Westerville	OH	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Assist.		Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional).			55.00
TOTAL This Period (last page this line number	er only)		

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In King, Teresa M., , , Mailing Address 1139 Tidewater Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	Date of Receipt 07 26 2019 Transaction ID : SA11AI.29382 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction	
Full Name of Individual (Last, First, Middle In King, Teresa M., , , Mailing Address 1139 Tidewater Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M M / D D / 2019 Transaction ID : SA11AI.29424 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In King, Teresa M., , , Mailing Address 1139 Tidewater Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 255.00	Date of Receipt 08
SUBTOTAL of Receipts This Page (optional)	>	45.00
TOTAL This Period (last page this line number	r only)	

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Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I King, Teresa M., , , Mailing Address 1139 Tidewater Court	Initial) or Full Orga	nization Name	Date of Receipt 09 04 2019
City	State	Zip Code	Transaction ID : SA11AI.29487
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Assist.	V. P.	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle I King, Teresa M., , , Mailing Address 1139 Tidewater Court	Date of Receipt		
			09 18 2019
City	State	Zip Code	Transaction ID : SA11AI.29529
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupa Assist.	ation (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 285.00	
Full Name of Individual (Last, First, Middle I King, Teresa M., , ,	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 1139 Tidewater Court		1	10 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Westerville	State	Zip Code 43082	Transaction ID : SA11AI.29560
	1 0	10002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Assist.	V. P.	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line numbe	er only)		

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND				
Α.	Full Name of Individual (Last, First, Middle Initi King, Teresa M., , , Mailing Address 1139 Tidewater Court	al) or Full Org	anization Name	Date of Receipt			
				10 16 2019			
	City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.29614			
	FEC ID number of contributing federal political committee.	С	10002	Amount of Each Receipt this Period			
	Name of Employer (for Individual)	'	ation (for Individual)	Memo Item			
	Motorists Mutual Ins. Co.	Assist	. V. P.	Payroll Deduction			
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 315.00				
В.	Full Name of Individual (Last, First, Middle Initi King, Teresa $M.$, , ,	al) or Full Org	anization Name	Date of Receipt			
	Mailing Address 1139 Tidewater Court	10 30 2019					
	City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.29656			
	FEC ID number of contributing federal political committee.	С	43002	Amount of Each Receipt this Period			
	Name of Employer (for Individual) Motorists Mutual Ins. Co.						
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 330.00				
С .	Full Name of Individual (Last, First, Middle Initi King, Teresa M., , ,	al) or Full Org	anization Name	Date of Receipt			
	Mailing Address 1139 Tidewater Court			11 13 2019			
	City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.29699 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		15.00			
	Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occup Assist.	ation (for Individual) V. P.	Memo Item Payroll Deduction			
	Receipt For: Primary General Other (specify)	ot For: Aggregate Year-to-Date ▼ Primary General					
H	SUBTOTAL of Receipts This Page (optional)			45.00			

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	ny information copied from such Reports and Stator commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initial King, Teresa M., , , Mailing Address 1139 Tidewater Court	al) or Full Orga	anization Name	Date of Receipt 11 26 2019
	City	State	Zip Code	Transaction ID : SA11AI.29741
	Westerville	ОН	43082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
	Motorists Mutual Ins. Co.	Payroll Deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 360.00	
В.	Full Name of Individual (Last, First, Middle Initial King, Teresa M., , ,	al) or Full Org	anization Name	Date of Receipt
	Mailing Address 1139 Tidewater Court	12 11 2019		
	City Westerville	State	Zip Code 43082	Transaction ID : SA11AI.29783
	FEC ID number of contributing federal political committee.	C	43062	Amount of Each Receipt this Period
	Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occup Assist	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 375.00	
С .	Full Name of Individual (Last, First, Middle Initial King, Teresa M., , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 1139 Tidewater Court			12 24 2019
	City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.29826 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupa Assist.	ation (for Individual) V. P.	Memo Item Payroll Deduction
	Receipt For:	Aggregate Ye	ear-to-Date ▼	
	Primary General Other (specify)			
H	SUBTOTAL of Receipts This Page (optional)			45.00

Use separate schedule(s) for each category of the Detailed Summary Page (check only 11a)

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	Statements may not be sold or used by any per- he name and address of any political committee to	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Lawrence, Todd, , Mr.,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 116 Clarke Lane		07 10 2019
City Hopkinton	State Zip Code NH 03229	Transaction ID : SA11AI.29340 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer (for Individual) Phenix Mutual Fire Ins. Co. Receipt For:	Occupation (for Individual) Sr. V.P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Middle I Lawrence, Todd, , Mr., Mailing Address 116 Clarke Lane	nitial) or Full Organization Name	Date of Receipt
City Hopkinton	State Zip Code NH 03229	Transaction ID : SA11Al.29384 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Phenix Mutual Fire Ins. Co.	Occupation (for Individual) Sr. V.P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name of Individual (Last, First, Middle I Lawrence, Todd, , Mr.,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 116 Clarke Lane	004	08 07 2019
City Hopkinton	State Zip Code NH 03229	Transaction ID : SA11AI.29426 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Phenix Mutual Fire Ins. Co. Receipt For:	Occupation (for Individual) Sr. V.P.	Memo Item Payroll Deduction
Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	····	75.00
TOTAL This Period (last page this line numbe	er only)	

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 21 2019 City State Zip Code Transaction ID: SA11AI.29455 NH 03229 Hopkinton Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer (for Individual) Occupation (for Individual) Memo Item Phenix Mutual Fire Ins. Co. Sr. V.P. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General

	Other (specify) ▼		425.00	
3.	Full Name of Individual (Last, First, Middle Initia Lawrence, Todd, , Mr.,	ıl) or Full Orga	anization Name	Date of Receipt
	Mailing Address 116 Clarke Lane			09 04 2019
	City	State	Zip Code	Transaction ID : SA11AI.29486
	Hopkinton	NH	03229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) Phenix Mutual Fire Ins. Co.	Occupa Sr. V.F	ation (for Individual) o.	Memo Item Payroll Deduction
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General Other (specify) ▼		450.00	
).	Full Name of Individual (Last, First, Middle Initia Lawrence, Todd, , Mr.,	ll) or Full Orga	anization Name	Date of Receipt
	Mailing Address 116 Clarke Lane	09 18 2019		
	City Hopkinton	State NH	Zip Code 03229	Transaction ID : SA11AI.29528 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Phenix Mutual Fire Ins. Co.	Sr. V.P		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 475.00	
	UBTOTAL of Receipts This Page (optional)		<u> </u>	75.00
T	OTAL This Period (last page this line number or	nly)	·····	
				FEC Schedule A (Form 3X) Rev. 06/20

Receipt For:

C.

Primary

General

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Payroll Deduction

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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 2019 10 City State Zip Code Transaction ID: SA11AI.29569 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co. Payroll Deduction Sr. V.P. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 10 16 2019 City State Zip Code Transaction ID: SA11AI.29613 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co.

Other (specify) ▼		525.00	
Full Name of Individual (Last, First, Middle In Lawrence, Todd, , Mr., Mailing Address 116 Clarke Lane	tial) or Full Organizati	ion Name	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Hopkinton		Code 229	Transaction ID : SA11AI.29655 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual) Phenix Mutual Fire Ins. Co.	Occupation ((for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 550.00	
			75.00

Sr. V.P.

Aggregate Year-to-Date ▼

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 2019 11 13 City Zip Code State Transaction ID: SA11AI.29698 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co. Sr. V.P. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 11 2019 City State Zip Code Transaction ID: SA11AI.29740 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co. Payroll Deduction Sr. V.P. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 11 2019 City Zip Code State Transaction ID: SA11AI.29782 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Phenix Mutual Fire Ins. Co. Sr. V.P. Receipt For: Aggregate Year-to-Date ▼ Primary General

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Any information copied from such Reports and or for commercial purposes, other than using to			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Lawrence, Todd, , Mr., Mailing Address 116 Clarke Lane	Initial) or Full Orga	nization Name	Date of Receipt
	Ι-	T	12 24 2019
City	State NH	Zip Code 03229	Transaction ID : SA11AI.29825
Hopkinton	INII	USZZÖ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Phenix Mutual Fire Ins. Co.	Sr. V.P.		Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 650.00]
Full Name of Individual (Last, First, Middle I	 nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6740 Callaway Court	Otata	7:n Code	07 10 7 2019
City Westerville	State OH	Zip Code 43082	Transaction ID : SA11Al.29331 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupa Assist.	tion (for Individual) V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle I	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6740 Callaway Court			07 26 2019
City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.29375
	OIT	45002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)		tion (for Individual)	Memo Item
Motorists Mutual Ins. Company Receipt For:	Assist. \		Payroll Deduction
Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 225.00]
SUBTOTAL of Receipts This Page (optional)			55.00
TOTAL This Period (last page this line number	er only)		

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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle II Lisi, Michael, , , Mailing Address 6740 Callaway Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 240.00	Date of Receipt M M M
Full Name of Individual (Last, First, Middle II Lisi, Michael, , , Mailing Address 6740 Callaway Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 255.00	Date of Receipt M M M
Full Name of Individual (Last, First, Middle II. Lisi, Michael, , , Mailing Address 6740 Callaway Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43082 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 270.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	·····	45.00
TOTAL This Period (last page this line numbe	r only)	

Other (specify)

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

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

B.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page (check only 11a

285.00

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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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lisi, Michael, , , Date of Receipt Mailing Address 6740 Callaway Court 2019 18 City State Zip Code Transaction ID: SA11AI.29527 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Assist. V. P. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Middle In Lisi, Michael, , ,	itial) or Full Or	ganization Name	Date of Receipt
Mailing Address 6740 Callaway Court			10 02 2019
City	State	Zip Code	Transaction ID : SA11AI.29563
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
Motorists Mutual Ins. Company	Assi	st. V. P.	Payroll Deduction
Receipt For:	Aggregate `	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lisi, Michael, , , Date of Receipt Mailing Address 6740 Callaway Court 16 2019 City State Zip Code Transaction ID: SA11AI.29612 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify)

45.00

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lisi, Michael, , , Date of Receipt Mailing Address 6740 Callaway Court 2019 10 City State Zip Code Transaction ID: SA11AI.29654 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lisi, Michael, , , Date of Receipt Mailing Address 6740 Callaway Court 11 2019 City State Zip Code Transaction ID: SA11AI.29697 Westerville OH 43082 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 345.00 \triangle

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Full Name of Individual (Last, First, Middle In Lisi, Michael, , , Mailing Address 6740 Callaway Court	nitial) or Full Org	ganization Name	Date of Receipt 11 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29739
Westerville	ОН	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Motorists Mutual Ins. Company	Assis	t. V. P.	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Y	'ear-to-Date ▼ 360.00	
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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ir Lisi, Michael, , , Mailing Address 6740 Callaway Court City Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company	State Zip Code OH 43082 C Occupation (for Individual) Assist, V. P.	Date of Receipt 12 11 2019 Transaction ID : SA11Al.29781 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name of Individual (Last, First, Middle Ir Lisi, Michael, , , Mailing Address 6740 Callaway Court City	State Zip Code	Date of Receipt 12 24 2019 Transaction ID : SA11Al.29824
Westerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company	OCcupation (for Individual) Assist. V. P.	Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date ▼	Date of Receipt M 07 10 2019 Transaction ID: SA11AI.29304 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	55.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr.	itial) or Full Organization Name	Date of Receipt
City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code WV 25213 C Occupation (for Individual)	7 26 2019 Transaction ID : SA11AI.29348 Amount of Each Receipt this Period 25.00 Memo Item
Brickstreet Insurance Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	Payroll Deduction
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / 2019 Transaction ID: SA11Al.29396 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date 425.00	Date of Receipt Mark
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Use separate schedule(s)

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for each category of the **Detailed Summary Page** 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Marshall, Brandon, , , Date of Receipt Mailing Address 74 Cassidy Dr. 2019 City Zip Code State Transaction ID: SA11AI.29484 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Marshall, Brandon, , , Date of Receipt Mailing Address 74 Cassidy Dr. 09 18 2019 City State Zip Code Transaction ID: SA11AI.29526 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 475.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Marshall, Brandon, , , Date of Receipt Mailing Address 74 Cassidy Dr. 10 02 2019 City Zip Code State Transaction ID: SA11AI.29589 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Brickstreet Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

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

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr.	itial) or Full Organization Name	Date of Receipt
City Winfield FEC ID number of contributing federal political committee.	State Zip Code WV 25213	Transaction ID : SA11AI.29611 Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) VP Aggregate Year-to-Date ▼ 525.00	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date ▼	Date of Receipt 10 30 2019 Transaction ID : SA11Al.29653 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 575.00	Date of Receipt 11 13 2019 Transaction ID: SA11AI.29696 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	75.00
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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date 600.00	Date of Receipt 11 26 2019 Transaction ID: SA11AI.29738 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify) ▼	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date 625.00	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29780 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Marshall, Brandon, , , Mailing Address 74 Cassidy Dr. City Winfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code WV 25213 C Occupation (for Individual) VP Aggregate Year-to-Date ▼	Date of Receipt 12 24 2019 Transaction ID : SA11AI.29823 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	75.00
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and or for commercial purposes, other than using the succession of the successi			erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COM	IPANY CIVIC FUND		
Full Name of Individual (Last, First, Middle McGee, Bill, , , Mailing Address 48 E. Frankfort St.	Initial) or Full Orga	nization Name	Date of Receipt	
Mailing Address 48 E. Frankfort St.			07 10 2019	
City	State	Zip Code	Transaction ID : SA11AI.29303	
Columbus	ОН	43206	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		40.00	
Name of Employer (for Individual) Motorists Insurance				
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 560.00]	
Full Name of Individual (Last, First, Middle McGee, Bill, , , Mailing Address 48 E. Frankfort St.	Initial) or Full Orga	nization Name	Date of Receipt	
Mailing Address 48 E. Frankfort St.			07 26 2019	
City	State	Zip Code	Transaction ID : SA11AI.29347	
Columbus	OH	43206	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		40.00	
Name of Employer (for Individual) Motorists Insurance	Occupa SVP	ation (for Individual)	Memo Item Payroll Deduction	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 600.00		
Full Name of Individual (Last, First, Middle C. McGee, Bill, , ,	Initial) or Full Orga	nization Name	Date of Receipt	
Mailing Address 48 E. Frankfort St.			08 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Columbus	State OH	Zip Code 43206	Transaction ID : SA11AI.29395	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 40.00	
Name of Employer (for Individual) Motorists Insurance	Occupa SVP	tion (for Individual)	Memo Item Payroll Deduction	
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 640.00]	
SUBTOTAL of Receipts This Page (optional).)	120.00	
TOTAL This Period (last page this line number	er only)			

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Any information copied from such Reports an or for commercial purposes, other than using					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY	CIVIC FUND			
Full Name of Individual (Last, First, Middle McGee, Bill, , ,	Initial) or Full Organization N	lame	Date of Receipt		
Mailing Address 48 E. Frankfort St.			08 21 2019		
City	State Zip Cod	<u> </u>	Transaction ID : SA11AI.29458		
Columbus	OH 43206		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	680.00			
Full Name of Individual (Last, First, Middle McGee, Bill, , ,	Initial) or Full Organization N	lame	Date of Receipt		
Mailing Address 48 E. Frankfort St.			09 04 2019		
City Columbus	State Zip Cod OH 43206	e	Transaction ID : SA11AI.29483		
FEC ID number of contributing	10200		Amount of Each Receipt this Period		
federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance	Occupation (for I SVP	ndividual)	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	720.00			
Full Name of Individual (Last, First, Middle	Initial) or Full Organization N	lame	Date of Receipt		
Mailing Address 48 E. Frankfort St.			09 18 2019		
City Columbus	State Zip Cod OH 43206	e	Transaction ID : SA11Al.29525 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance	Occupation (for I	ndividual)	Memo Item Payroll Deduction		
Receipt For:	Aggregate Year-to-Date	▼			
Primary General Other (specify)	4	760.00			
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Use separate schedule(s) for each category of the Detailed Summary Page

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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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McGee, Bill, , , Date of Receipt Mailing Address 48 E. Frankfort St. 2019 City State Zip Code Transaction ID: SA11AI.29583 OH Columbus 43206 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name of Individual (Last First Middle Initial) or Full Organization Name

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В.	McGee, Bill, , , Mailing Address 48 E. Frankfort St. City Columbus	Mailing Address 48 E. Frankfort St. City State Zip Code Columbus OH 43206							
	FEC ID number of contributing federal political committee.	C		40.00					
	Name of Employer (for Individual) Motorists Insurance	Occupa SVP	ation (for Individual)	Memo Item Payroll Deduction					
	Receipt For: Primary General Other (specify) ▼								
C.	Full Name of Individual (Last, First, Middle Ini McGee, Bill, , ,	Date of Receipt							
	Mailing Address 48 E. Frankfort St.	Mailing Address 48 E. Frankfort St.							
	City	State	Zip Code	Transaction ID : SA11AI.29652					

Columbus OH 43206 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP Payroll Deduction Motorists Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify)

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	Statements may not be sold or used by any phe name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I McGee, Bill, , , Mailing Address 48 E. Frankfort St. City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43206 C Occupation (for Individual) SVP Aggregate Year-to-Date ▼ 920.00	Date of Receipt 11 13 2019 Transaction ID: SA11AI.29695 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I McGee, Bill, , , Mailing Address 48 E. Frankfort St. City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	State Zip Code 43206 C	Date of Receipt 11 26 2019 Transaction ID: SA11Al.29737 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I McGee, Bill, , , Mailing Address 48 E. Frankfort St. City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43206 C Occupation (for Individual) SVP Aggregate Year-to-Date ▼	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29779 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional))	120.00
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			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
MOTORISTS MUTUAL INSU	JRANCE COM	PANY CIVIC FUND)
Full Name of Individual (Last, First, Middle McGee, Bill, , , Mailing Address 48 E. Frankfort St.	e Initial) or Full Orgai	nization Name	Date of Receipt
Mailing Address 46 E. Flatikion St.			12 24 2019
City	State	Zip Code	Transaction ID : SA11AI.29822
Columbus	ОН	43206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer (for Individual)	Occupat	tion (for Individual)	Memo Item
Motorists Insurance	SVP	,	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1040.00	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	e Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.			07 10 2019
City	State	Zip Code	Transaction ID : SA11AI.29326
Columbus	OH	43219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual) Motorists Mutual Insurance Co	1 .	tion (for Individual) egal Officer	Memo Item Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼	4	350.00	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	e Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.			07 26 2019
City Columbus	State OH	Zip Code 43219	Transaction ID : SA11AI.29370 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual)	Occupat	tion (for Individual)	Memo Item
Motorists Mutual Insurance Co	Chief Le	egal Officer	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num			90.00

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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle Init Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	ial) or Full Organization Name	Date of Receipt				
City Columbus	State Zip Code OH 43219	08 07 2019 Transaction ID : SA11AI.29414 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Chief Legal Officer Aggregate Year-to-Date ▼ 400.00	Memo Item Payroll Deduction				
Full Name of Individual (Last, First, Middle Init Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	ial) or Full Organization Name	Date of Receipt 08 21 2019				
City Columbus FEC ID number of contributing federal political committee.	State Zip Code OH 43219	Transaction ID : SA11AI.29459 Amount of Each Receipt this Period 25.00				
Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Chief Legal Officer Aggregate Year-to-Date ▼ 425.00	Memo Item Payroll Deduction				
Full Name of Individual (Last, First, Middle Init Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	ial) or Full Organization Name	Date of Receipt				
City Columbus FEC ID number of contributing federal political committee.	State Zip Code 43219	09 04 2019 Transaction ID : SA11AI.29482 Amount of Each Receipt this Period 25.00				
Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify)	Occupation (for Individual) Chief Legal Officer Aggregate Year-to-Date ▼ 450.00	Memo Item Payroll Deduction				
SUBTOTAL of Receipts This Page (optional)		75.00				
TOTAL This Period (last page this line number of	only)					

City

Columbus

FEC ID number of contributing

federal political committee.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Transaction ID: SA11AI.29582

Amount of Each Receipt this Period

25.00

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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 2019 18 City State Zip Code Transaction ID: SA11AI.29524 ОН Columbus 43219 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Motorists Mutual Insurance Co Chief Legal Officer Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 10 2019

Zip Code

43219

State

OH

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Name of Employer (for Individual) Motorists Mutual Insurance Co	Occupation (for Individual) Chief Legal Officer	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle I C. Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	nitial) or Full Organization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.29609
Columbus	OH 43219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Insurance Co	Chief Legal Officer	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 525.00	
		75.00

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 2019 10 City State Zip Code Transaction ID: SA11AI.29651 OH Columbus 43219 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co Chief Legal Officer Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 11 2019 City State Zip Code Transaction ID: SA11AI.29694 Columbus OH 43219 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co Payroll Deduction Chief Legal Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 575.00 \triangle

	-	4	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.			11 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29736
Columbus	ОН	43219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00 Memo Item
Name of Employer (for Individual)	Occup	pation (for Individual)	
Motorists Mutual Insurance Co	Chief	Legal Officer	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)			75.00

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and ad	dress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.
MOTORISTS MUTUAL INSU	RANCE CO	MPANY CIVIC FUND)
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.			12 11 2019
City	State	Zip Code	Transaction ID : SA11AI.29778
Columbus	ОН	43219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Motorists Mutual Insurance Co	Chief	Legal Officer	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 625.00	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.			12 24 2019
City	State	Zip Code	Transaction ID : SA11AI.29821
Columbus	OH	43219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual) Motorists Mutual Insurance Co		pation (for Individual) Legal Officer	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 650.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 306 Schall Place			07 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Commercial Point	State OH	Zip Code 43116	Transaction ID : SA11AI.29325 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Brickstreet Insurance	VP		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			65.00

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Any information copied from such Reports and or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY C	IVIC FUND	
Full Name of Individual (Last, First, Middle Myles, Leslie, , , Mailing Address 306 Schall Place	Initial) or Full Organization Nam	ne	Date of Receipt
			07 26 2019
City	State Zip Code 43116		Transaction ID : SA11AI.29369
Commercial Point	OH 43116		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Indiv	<i>'</i>	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	225.00	
Full Name of Individual (Last, First, Middle Myles, Leslie, , ,	Initial) or Full Organization Nam	ne	Date of Receipt
Mailing Address 306 Schall Place	Chata 7:n Cada		08 07 2019
City Commercial Point	State Zip Code 43116		Transaction ID : SA11Al.29413 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Indi	′	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	240.00	
Full Name of Individual (Last, First, Middle . Myles, Leslie, , ,	Initial) or Full Organization Nam	ne	Date of Receipt
Mailing Address 306 Schall Place			08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Commercial Point	State Zip Code 43116		Transaction ID : SA11AI.29460 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Indiv	,	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	255.00	
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line numb	er only)		

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	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND							
Α.	Full Name of Individual (Last, First, Middle Initi Myles, Leslie, , , Mailing Address 306 Schall Place	al) or Full Org		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City Commercial Point	State OH	Zip Code 43116	Transaction ID : SA11AI.29481						
	FEC ID number of contributing federal political committee.	С	43110	Amount of Each Receipt this Period						
	Name of Employer (for Individual)	Occup VP	ation (for Individual)	Memo Item						
	Brickstreet Insurance Receipt For: Primary General Other (specify) ▼	Payroll Deduction								
В.	Full Name of Individual (Last, First, Middle Initi Myles, Leslie, , , Mailing Address 306 Schall Place	Date of Receipt								
	City	State	Zip Code	09 18 2019						
	Commercial Point	ОН	43116	Transaction ID : SA11AI.29523 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.00						
	Name of Employer (for Individual) Brickstreet Insurance	Occup VP	ation (for Individual)	Memo Item Payroll Deduction						
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 285.00							
С .	Full Name of Individual (Last, First, Middle Initi Myles, Leslie, , ,	al) or Full Org	anization Name	Date of Receipt						
	Mailing Address 306 Schall Place			10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City Commercial Point	State OH	Zip Code 43116	Transaction ID : SA11AI.29597 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.00						
	Name of Employer (for Individual) Brickstreet Insurance	Occup VP	ation (for Individual)	Memo Item Payroll Deduction						
	Receipt For: Primary General Other (specify)									
H	SUBTOTAL of Receipts This Page (optional)			45.00						

FOR LINE NUMBER:					PAGE	1	42 OF	186	
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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Myles, Leslie, , ,) Mailing Address 306 Schall Place City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 315.00	Date of Receipt 10 16 2019 Transaction ID: SA11AI.29608 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Myles, Leslie, , , Mailing Address 306 Schall Place City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary Other (specify) Full Name of Individual (Last, First, Middle In Individual)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 330.00	Date of Receipt 10 30 2019 Transaction ID: SA11Al.29650 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Myles, Leslie, , , Mailing Address 306 Schall Place City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date 345.00	Date of Receipt M M M / 2019 Transaction ID: SA11Al.29693 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	45.00
TOTAL This Period (last page this line number	r only)	

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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Myles, Leslie, , ,) Mailing Address 306 Schall Place City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date 360.00	Date of Receipt 11 26 2019 Transaction ID: SA11AI.29735 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Myles, Leslie, , , Mailing Address 306 Schall Place City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle In Individual)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date ▼ 375.00	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29777 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
City Commercial Point FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify)	State Zip Code OH 43116 C Occupation (for Individual) VP Aggregate Year-to-Date 390.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	45.00
TOTAL This Period (last page this line number	r only)	

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Obrokta, TJ, , , Date of Receipt Mailing Address 8810 Ventura Way 2019 10 City State Zip Code Transaction ID: SA11AI.29339 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) President Payroll Deduction Motorists Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Obrokta, TJ, , , Date of Receipt Mailing Address 8810 Ventura Way 07 2019 City State Zip Code Transaction ID: SA11AI.29383 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 \triangle

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Full Name of Individual (Last, First, Middle . Obrokta, TJ, , ,	anization Name	Date of Receipt	
Mailing Address 8810 Ventura Way	08 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID : SA11AI.29425
Dublin	ОН	43016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
Motorists Insurance Group	Presid	,	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)			150.00

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

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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may no he name and address	t be sold or used by any pe ss of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMF	PANY CIVIC FUND					
Full Name of Individual (Last, First, Middle I	Initial) or Full Organi	zation Name	Date of Receipt				
Mailing Address 8810 Ventura Way			08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State 2	Zip Code	Transaction ID : SA11AI.29461				
Dublin	ОП	43016	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item				
Motorists Insurance Group	President	t	Payroll Deduction				
Receipt For:	Aggregate Year-	-to-Date ▼					
Primary General Other (specify) ▼		850.00					
Full Name of Individual (Last, First, Middle I	Initial) or Full Organi	zation Name	Date of Receipt				
Mailing Address 8810 Ventura Way			09 04 2019				
City		Zip Code	Transaction ID : SA11AI.29480				
Dublin	ОН	43016	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	50.00						
Name of Employer (for Individual) Motorists Insurance Group	Occupation Presiden	on (for Individual) t	Memo Item Payroll Deduction				
Receipt For:	Aggregate Year-	-to-Date ▼					
Primary General Other (specify) ▼	4	900.00					
Full Name of Individual (Last, First, Middle I	Initial) or Full Organi	zation Name	Date of Receipt				
Mailing Address 8810 Ventura Way			09 18 2019				
City Dublin	State 2	Zip Code 43016	Transaction ID : SA11AI.29522				
-	OII	43010	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item				
Motorists Insurance Group	President		Payroll Deduction				
Receipt For: Primary General	Aggregate Year-	-to-Date ▼					
Other (specify)		950.00					
SUBTOTAL of Receipts This Page (optional)		·····	150.00				
TOTAL This Period (last page this line number	er only)						

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Obrokta, TJ, , , Date of Receipt Mailing Address 8810 Ventura Way 2019 City Zip Code State Transaction ID: SA11AI.29585 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Obrokta, TJ, , , Date of Receipt Mailing Address 8810 Ventura Way 10 16 2019 City State Zip Code Transaction ID: SA11AI.29607 Dublin OH 43016 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1050.00

1000.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Obrokta, TJ, , , Date of Receipt Mailing Address 8810 Ventura Way 30 2019 City State Zip Code Transaction ID: SA11AI.29649 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group President Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify)

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Obrokta, TJ, , ,) Mailing Address 8810 Ventura Way City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C Occupation (for Individual) President Aggregate Year-to-Date ▼ 1150.00	Date of Receipt 11 13 2019 Transaction ID: SA11AI.29692 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Obrokta, TJ, , , Mailing Address 8810 Ventura Way City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C Occupation (for Individual) President Aggregate Year-to-Date ▼	Date of Receipt 11 26 2019 Transaction ID: SA11Al.29734 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Obrokta, TJ, , , Mailing Address 8810 Ventura Way City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C Occupation (for Individual) President Aggregate Year-to-Date ▼	Date of Receipt 12 11 2019 Transaction ID: SA11AI.29776 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	·····	150.00
TOTAL This Period (last page this line number	er only)	

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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Obrokta, TJ, , ,) Mailing Address 8810 Ventura Way City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C Occupation (for Individual) President Aggregate Year-to-Date ▼	Date of Receipt 12 24 2019 Transaction ID: SA11Al.29819 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle II Peacock, Mark, , Mr., Mailing Address 4460 Swenson Street City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle III	State Zip Code OH 43026 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 210,00	Date of Receipt 07 10 2019 Transaction ID: SA11Al.29328 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
City Hilliard FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary Other (specify)	State Zip Code OH 43026 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 225.00	Date of Receipt M M M / 26 2019 Transaction ID: SA11Al.29372 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	·····	80.00
TOTAL This Period (last page this line numbe	r only)	

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	the name and add	dress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Peacock, Mark, , Mr., Mailing Address 4460 Swenson Street	e Initial) or Full Org	ganization Name	Date of Receipt
City	State	Zip Code	08 07 2019
Hilliard	OH	43026	Transaction ID : SA11AI.29416 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Motorists Mutual Ins. Company		t. V. P.	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 240.00]
Full Name of Individual (Last, First, Middle Peacock, Mark, , Mr., Mailing Address 4460 Swenson Street	e Initial) or Full Org	ganization Name	Date of Receipt
Maining Address 4460 Swellson Street			08 21 2019
City	State	Zip Code	Transaction ID : SA11AI.29462
Hilliard	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	15.00		
Name of Employer (for Individual) Motorists Mutual Ins. Company		oation (for Individual) t. V. P.	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 255,00	
Full Name of Individual (Last, First, Middle Peacock, Mark, , Mr.,	Date of Receipt		
Mailing Address 4460 Swenson Street			09
City Hilliard	State OH	Zip Code 43026	Transaction ID : SA11AI.29479 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Motorists Mutual Ins. Company	Assist	. V. P.	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 270.00	
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num			45.00

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peacock, Mark, , Mr., Date of Receipt Mailing Address 4460 Swenson Street 2019 18 City State Zip Code Transaction ID: SA11AI.29521 OH Hilliard 43026 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 285.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peacock, Mark, , Mr., Date of Receipt Mailing Address 4460 Swenson Street 10 2019 City State Zip Code Transaction ID: SA11AI.29566 Hilliard OH 43026 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00

	,	,	
Full Name of Individual (Last, First, Middle In Peacock, Mark, , Mr.,	itial) or Full Orga	anization Name	Date of Receipt
Mailing Address 4460 Swenson Street			10 16 2019
City	State	Zip Code	Transaction ID : SA11AI.29606
Hilliard	ОН	43026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Mutual Ins. Company	Assist.	V. P.	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 315.00	
LIDTOTAL of Descripts This Days (entires)			45.00

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	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.											
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND									
Α.	Full Name of Individual (Last, First, Middle Initial Peacock, Mark, , Mr., Mailing Address 4460 Swenson Street	al) or Full Orga	anization Name	Date of Receipt								
	211	To	7. 0.1	10 30 2019								
	City Hilliard	State OH	Zip Code 43026	Transaction ID : SA11AI.29648 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		15.00								
	Name of Employer (for Individual)	1	ation (for Individual)	Memo Item								
	Motorists Mutual Ins. Company Receipt For:	Assist.		Payroll Deduction								
	Primary General Other (specify) ▼											
В.	Full Name of Individual (Last, First, Middle Initial Peacock, Mark, , Mr.,	Date of Receipt										
	Mailing Address 4460 Swenson Street	11 13 2019										
	City	State	Zip Code 43026	Transaction ID : SA11AI.29691								
	Hilliard	ОП	43026	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		15.00								
	Name of Employer (for Individual) Motorists Mutual Ins. Company	Occup Assist	ation (for Individual) V. P.	Memo Item Payroll Deduction								
	Receipt For: Primary General Other (specify) ▼											
С .	Full Name of Individual (Last, First, Middle Initial Peacock, Mark, , Mr.,	al) or Full Orga	anization Name	Date of Receipt								
	Mailing Address 4460 Swenson Street			11 26 / Y Y Y Y Y								
	City Hilliard	State OH	Zip Code 43026	Transaction ID : SA11AI.29733 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		15.00								
	Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupa Assist.	ation (for Individual) V. P.	Memo Item Payroll Deduction								
	Receipt For:	Aggregate Ye	ear-to-Date ▼									
	Primary General Other (specify)		360.00									
H	SUBTOTAL of Receipts This Page (optional)			45.00								

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Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMP	PANY CIVIC FUND			
Full Name of Individual (Last, First, Middle Peacock, Mark, , Mr.,	Initial) or Full Organiz	zation Name	Date of Receipt		
Mailing Address 4460 Swenson Street			12 11 2019		
City		Zip Code	Transaction ID : SA11AI.29775		
Hilliard	ОН	43026	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		15.00		
Name of Employer (for Individual)	Occupatio	n (for Individual)	Memo Item		
Motorists Mutual Ins. Company	Assist. V.	P	Payroll Deduction		
Receipt For:	Aggregate Year-	to-Date ▼			
Primary General	7.99.094.0				
Other (specify) ▼	45	375.00			
Full Name of Individual (Last, First, Middle 3. Peacock, Mark, , Mr.,	Initial) or Full Organiz	zation Name	Date of Receipt		
Mailing Address 4460 Swenson Street			M M M / D D / Y Y Y Y		
			12 24 2019		
City		Zip Code	Transaction ID : SA11Al.29818		
Hilliard	ОН	43026	Amount of Each Receipt this Period		
FEC ID number of contributing	С		15.00		
federal political committee.	ederal political committee.				
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation Assist. V.	n (for Individual) P.	Memo Item Payroll Deduction		
Receipt For:	Aggregate Year-	to-Date ▼			
Primary General					
Other (specify) ▼		390.00			
Full Name of Individual (Last, First, Middle Puchala, Damian, , ,	Initial) or Full Organiz	zation Name	Date of Receipt		
Mailing Address 325 Olenview Circle			07 10 2019		
City	State	Zip Code	Transaction ID : SA11AI.29309		
Powell	OH	43065	Amount of Each Receipt this Period		
FEC ID number of contributing					
federal political committee.	C		15.00		
Name of Employer (for Individual)	Occupation	n (for Individual)	Memo Item		
Motorists Mutual Ins. Company	Assist. V.	,	Payroll Deduction		
Receipt For:	Aggregate Year-				
Primary General	/ iggrogato rear-	to Bato .			
Other (specify)		210.00			
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Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPA	NY CIVIC FUND					
Full Name of Individual (Last, First, Middle Puchala, Damian, , , Mailing Address 325 Olenview Circle	Initial) or Full Organizati	on Name	Date of Receipt				
			07 26 2019				
City	'	Code	Transaction ID : SA11AI.29353				
Powell	OH 43	3065	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ÿ [·]						
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Motorists Mutual Ins. Company	Assist. V. P.		Payroll Deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-l	Date ▼ 225.00					
Other (openity)	7						
Full Name of Individual (Last, First, Middle Puchala, Damian, , ,	Initial) or Full Organizati	on Name	Date of Receipt				
Mailing Address 325 Olenview Circle							
City	1 '	Code	Transaction ID : SA11AI.29401				
Powell	OH 43	065	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		15.00				
Name of Employer (for Individual) Motorists Mutual Ins. Company	Occupation (Assist. V. P.	(for Individual)	Memo Item Payroll Deduction				
Receipt For: Primary General	Aggregate Year-to-I						
Other (specify) ▼		240.00					
Full Name of Individual (Last, First, Middle Puchala, Damian, , ,	Initial) or Full Organizati	on Name	Date of Receipt				
Mailing Address 325 Olenview Circle			08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Powell		Code 065	Transaction ID : SA11AI.29464				
	011 43	UUJ	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.00				
Name of Employer (for Individual)	' '	for Individual)	Memo Item				
Motorists Mutual Ins. Company	Assist. V. P.		Payroll Deduction				
Receipt For: Primary General	Aggregate Year-to-I	Date ▼					
Other (specify)	4	255.00					
SUBTOTAL of Receipts This Page (optional).	1		45.00				
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C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Puchala, Damian, , , Date of Receipt Mailing Address 325 Olenview Circle 2019 City State Zip Code Transaction ID: SA11AI.29477 OH Powell 43065 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Puchala, Damian, , , Date of Receipt Mailing Address 325 Olenview Circle 09 18 2019 City State Zip Code Transaction ID: SA11AI.29519 OH 43065 Powell Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction Assist. V. P. Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	285.00	
Full Name of Individual (Last, First, Middle Puchala, Damian, , , Mailing Address 325 Olenview Circle	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	10 02 2019 Transaction ID : SA11AI.29564
Powell	OH 43065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Mutual Ins. Company	Assist. V. P.	Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	

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

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Any information copied from such Reports and Sor for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 315.00	Date of Receipt 10 16 2019 Transaction ID: SA11Al.29604 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼ 330.00	Date of Receipt 10 30 2019 Transaction ID: SA11Al.29646 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 345.00	Date of Receipt 11 13 2019 Transaction ID: SA11Al.29689 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)		45.00
TOTAL This Period (last page this line number	only)	

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼ 360.00	Date of Receipt 11 26 2019 Transaction ID: SA11AI.29731 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle I	State Zip Code OH 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date ▼ 375.00	Date of Receipt 12 11 2019 Transaction ID: SA11Al.29773 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Puchala, Damian, , , Mailing Address 325 Olenview Circle City Powell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43065 C Occupation (for Individual) Assist. V. P. Aggregate Year-to-Date 390.00	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional)	>	45.00
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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Puleo, Pamela, , , Mailing Address 57 Millstone Drive City Concord FEC ID number of contributing federal political committee. Name of Employer (for Individual) Phenix Mutual Receipt For: Primary General Other (specify)	State Zip Code NH 03301 C Occupation (for Individual) Director Aggregate Year-to-Date ▼	Date of Receipt 11 18 2019 Transaction ID : SA11AI.29866 Amount of Each Receipt this Period 150.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Rader, David, , , Mailing Address 2452 SW 50th St. City Gainesville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Encova Insurance Receipt For: Primary General Other (specify)	State Zip Code FL 32608 C Occupation (for Individual) Board Member Aggregate Year-to-Date 500.00	Date of Receipt M M M / 31 2019 Transaction ID : SA11Al.29869 Amount of Each Receipt this Period 500.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Rader, David, , , Mailing Address 2452 SW 50th St. City Gainesville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Encova Insurance Receipt For: Primary General Other (specify)	State Zip Code FL 32608 C Occupation (for Individual) Board Member Aggregate Year-to-Date ▼	Date of Receipt 11
SUBTOTAL of Receipts This Page (optional)	·····	1150.00
TOTAL This Period (last page this line numbe	r only)	

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	the name and add	dress of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Pation (for Individual) anning Prod & Svs ear-to-Date 350.00	Date of Receipt 07 10 2019 Transaction ID: SA11AI.29333 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Dation (for Individual) anning Prod & Svs ear-to-Date 375.00	Date of Receipt 07
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Pation (for Individual) Panning Prod & Svs Pear-to-Date 400.00	Date of Receipt 08 07 2019 Transaction ID: SA11AI.29420 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional			75.00

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND									
Α.	Full Name of Individual (Last, First, Middle Initi-Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue	al) or Full Org	anization Name	Date of Receipt 08 21 2019								
	City	State	Zip Code	Transaction ID : SA11AI.29465								
	Worthington FEC ID number of contributing federal political committee.	ОН	43085	Amount of Each Receipt this Period 25.00								
	Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	Memo Item Payroll Deduction										
В.	Full Name of Individual (Last, First, Middle Initial Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue	al) or Full Org	anization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City	State	Zip Code	09 04 2019 Transaction ID : SA11Al.29476								
	Worthington	OH	43085	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	25.00										
	Name of Employer (for Individual) Motorists Mutual Ins. Company		ation (for Individual) anning Prod & Svs	Memo Item Payroll Deduction								
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 450.00									
С .	Full Name of Individual (Last, First, Middle Initi-Rudowicz, Randolph A., , ,	al) or Full Org	anization Name	Date of Receipt								
	Mailing Address 1026 Loch Ness Avenue			09 18 2019								
	City Worthington	State OH	Zip Code 43085	Transaction ID : SA11AI.29518 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)		ation (for Individual) Inning Prod & Svs ear-to-Date ▼ 475.00	Memo Item Payroll Deduction								
H	SUBTOTAL of Receipts This Page (optional)		>	75.00								

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND									
Α.	Full Name of Individual (Last, First, Middle Initial Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue	al) or Full Org	anization Name	Date of Receipt 10 02 2019								
	City	State OH	Zip Code	Transaction ID : SA11AI.29557								
	Worthington FEC ID number of contributing federal political committee.	С	43085	Amount of Each Receipt this Period 25.00								
	Name of Employer (for Individual)	1 .	ation (for Individual)	Memo Item								
	Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼		anning Prod & Svs ear-to-Date ▼ 500.00	Payroll Deduction								
В.	Full Name of Individual (Last, First, Middle Initial Rudowicz, Randolph A., , ,	al) or Full Org	anization Name	Date of Receipt								
	Mailing Address 1026 Loch Ness Avenue City	10 16 2019										
	Worthington	State OH	Zip Code 43085	Transaction ID : SA11AI.29603 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C	25.00									
	Name of Employer (for Individual) Motorists Mutual Ins. Company	1	ation (for Individual) anning Prod & Svs	Memo Item Payroll Deduction								
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 525.00									
С .	Full Name of Individual (Last, First, Middle Initial Rudowicz, Randolph A., , ,	al) or Full Org	anization Name	Date of Receipt								
	Mailing Address 1026 Loch Ness Avenue			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City Worthington	State OH	Zip Code 43085	Transaction ID : SA11AI.29645 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) Motorists Mutual Ins. Company		ation (for Individual) anning Prod & Svs	Memo Item Payroll Deduction								
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 550.00									
H	SUBTOTAL of Receipts This Page (optional)			75.00								

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	the name and add	dress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , ,) Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Dation (for Individual) anning Prod & Svs ear-to-Date ▼ 575.00	Date of Receipt 11 13 2019 Transaction ID: SA11AI.29688 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Dation (for Individual) Planning Prod & Svs ear-to-Date 600.00	Date of Receipt 11 26 2019 Transaction ID : SA11Al.29730 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C	Zip Code 43085 Dation (for Individual) Danning Prod & Svs Dear-to-Date 625.00	Date of Receipt 12 11 2019 Transaction ID: SA11AI.29772 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)			75.00

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	ny information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND					
Α.	Full Name of Individual (Last, First, Middle Initi Rudowicz, Randolph A., , ,	ial) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1026 Loch Ness Avenue			12 24 2019				
	City	State	Zip Code	Transaction ID : SA11AI.29815				
	Worthington	ОН	43085	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		25.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	Motorists Mutual Ins. Company		lanning Prod & Svs	Payroll Deduction				
	Receipt For:							
	Primary General	Aggregate	/ear-to-Date ▼					
	Other (specify) ▼							
В.	Full Name of Individual (Last, First, Middle Initi Slattery, Austin, , ,	Date of Receipt						
	Mailing Address 734 Prairie Run Dr.	07 10 2019						
	City	State	Zip Code	Transaction ID : SA11AI.29300				
	Sunbury	ОН	43074	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		15.00				
	Name of Employer (for Individual) Motorists Mutual Ins Co.		pation (for Individual) stant VP	Memo Item Payroll Deduction				
	Receipt For:	Aggregate \	∕ear-to-Date ▼					
	Primary General Other (specify) ▼	Primary General						
<u>С</u>	Full Name of Individual (Last, First, Middle Initi	ial) or Full Or	ganization Name	Date of Receipt				
•	Mailing Address 734 Prairie Run Dr.			07 26 2019				
	City	State	Zip Code	Transaction ID : SA11AI.29345				
	Sunbury	ОН	43074	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		15.00				
	Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item				
	Motorists Mutual Ins Co.		tant VP	Payroll Deduction				
	Receipt For:		/ear-to-Date ▼					
	Primary General	Aggregate	Teal-IO-Date ▼					
	Other (specify)		225.00					
S	SUBTOTAL of Receipts This Page (optional)		·····	55.00				
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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Slattery, Austin, , , Mailing Address 734 Prairie Run Dr. City Sunbury FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify)	Date of Receipt M M M	
Full Name of Individual (Last, First, Middle I Slattery, Austin, , , Mailing Address 734 Prairie Run Dr. City Sunbury FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify) This is the state of the	Date of Receipt M M	
Full Name of Individual (Last, First, Middle I Slattery, Austin, , , Mailing Address 734 Prairie Run Dr. City Sunbury FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins Co. Receipt For: Primary General Other (specify)	Date of Receipt M M M	
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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be s the name and address of a	old or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPAN	Y CIVIC FUND	
Full Name of Individual (Last, First, Middle Slattery, Austin, , ,	Initial) or Full Organization	Name	Date of Receipt
Mailing Address 734 Prairie Run Dr.			09 18 2019
City	State Zip Co	<u> </u>	Transaction ID : SA11AI.29517
Sunbury	OH 4307	<u>'4</u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual)	Occupation (for	Individual)	Memo Item
Motorists Mutual Ins Co.	Assistant VP		Payroll Deduction
Receipt For:	Aggregate Year-to-Da	te ▼	
Primary General	00 0		
Other (specify) ▼		285.00	
Full Name of Individual (Last, First, Middle 3. Slattery, Austin, , ,	Initial) or Full Organization	Name	Date of Receipt
Mailing Address 734 Prairie Run Dr.			M M / D D / Y Y Y Y
			10 02 2019
City	State Zip Co	ode	Transaction ID : SA11AI.29576
Sunbury	OH 4307	4	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins Co.	Occupation (for Assistant VP	· Individual)	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Da	te ▼	
Primary General Other (specify) ▼	4	300.00	
Full Name of Individual (Last, First, Middle S. Slattery, Austin, , ,	Initial) or Full Organization	Name	Date of Receipt
Mailing Address 734 Prairie Run Dr.			<u> </u>
Walling Address 734 Prairie Run Dr.			10 16 2019
City	State Zip Co	ode	Transaction ID : SA11AI.29602
Sunbury	OH 4307	⊢	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
			Maria Harri
Name of Employer (for Individual)	Occupation (for	Individual)	Memo Item
Motorists Mutual Ins Co. Receipt For:	Assistant VP		Payroll Deduction
Primary General	Aggregate Year-to-Da	te V	
Other (specify)	45	315.00	
SUBTOTAL of Receipts This Page (optional)			45.00
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		or used by any person for the purpose of soliciting contribution political committee to solicit contributions from such committe	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COMPANY (CIVIC FUND	
Full Name of Individual (Last, First, Middle Slattery, Austin, , ,	Initial) or Full Organization Nat	Date of Receipt	
Mailing Address 734 Prairie Run Dr.		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
City	State Zip Code	Transaction ID : SA11AI.29644	
Sunbury	OH 43074	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	15.00	
Name of Employer (for Individual)	Occupation (for Ind	ividual) Memo Item	
Motorists Mutual Ins Co.	Assistant VP	Payroll Deduction	
Receipt For:	Aggregate Year-to-Date ▼		
Primary General	00 0		
Other (specify) ▼		330.00	
Full Name of Individual (Last, First, Middle 3. Slattery, Austin, , ,	Initial) or Full Organization Nar	ne Date of Receipt	
Mailing Address 734 Prairie Run Dr.		M M / D D / Y Y Y Y	Υ
		11 13 2019	
City	State Zip Code	Transaction ID : SA11AI.29687	
Sunbury	OH 43074	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	15.00	0
Name of Employer (for Individual) Motorists Mutual Ins Co.	Occupation (for Ind	ividual) Memo Item Payroll Deduction	
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	4 4	345.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Nat	ne Date of Receipt	
Mailing Address 734 Prairie Run Dr.		11 / 26 / 2019	Y
City	State Zip Code	Transaction ID : SA11Al.29729	
Sunbury	OH 43074	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	15.00	0
Name of Employer (for Individual)	Occupation (for Ind	Memo Item	
Motorists Mutual Ins Co.	Assistant VP	Payroll Deduction	
Receipt For:			
Primary General	Aggregate Year-to-Date ▼		
Other (specify)	7 7	360.00	
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Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Slattery, Austin, , , Date of Receipt Mailing Address 734 Prairie Run Dr. 2019 City Zip Code State Transaction ID: SA11AI.29771 OH Sunbury 43074 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assistant VP Motorists Mutual Ins Co. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Slattery, Austin, , , Date of Receipt Mailing Address 734 Prairie Run Dr. 12 2019 City State Zip Code Transaction ID: SA11AI.29814 OH 43074 Sunbury Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins Co. Payroll Deduction Assistant VP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 390.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Smithers, Ralph W., , , Jr. Date of Receipt Mailing Address 6418 Summers Nook Drive 10 2019 City State Zip Code Transaction ID: SA11AI.29332 OH New Albany 43054 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company **VP MAX Service** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify)

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

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Smithers, Ralph W., , , , Jr. Mailing Address 6418 Summers Nook Drive City New Albany FEC ID number of contributing federal political committee.	State OH	Zip Code 43054	Date of Receipt M M M
Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	Memo Item Payroll Deduction		
Full Name of Individual (Last, First, Middle In Smithers, Ralph W., , , Jr. Mailing Address 6418 Summers Nook Drive City New Albany FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State OH C Occupat VP MAX	Date of Receipt M M M	
Full Name of Individual (Last, First, Middle In Smithers, Ralph W., , , Jr. Mailing Address 6418 Summers Nook Drive City New Albany FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	Date of Receipt M M M / 21 / 2019 Transaction ID : SA11Al.29467 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction		
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line number	r only)		

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Smithers, Ralph W., , , Jr. Date of Receipt Mailing Address 6418 Summers Nook Drive 2019 В

City	State	Zip Code	Transaction ID : SA11AI.29474
New Albany	ОН	43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For:	VP MA	oation (for Individual) AX Service	Memo Item Payroll Deduction
Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 270.00	
Full Name of Individual (Last, First, N Smithers, Ralph W., , , Jr.		anization Name	Date of Receipt
Mailing Address 6418 Summers Nook			09 18 2019
City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.29516 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company	· ·	pation (for Individual) AX Service	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 285.00	
Full Name of Individual (Last, First, N. Smithers, Ralph W., , , Jr.	liddle Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 6418 Summers Nook			10 02 2019
City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.29558 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company		pation (for Individual) AX Service	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 300.00	
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Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smithers, Ralph W., , , Jr. Date of Receipt Mailing Address 6418 Summers Nook Drive 16 2019 City Zip Code State Transaction ID: SA11AI.29601 OH New Albany 43054 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **VP MAX Service** Motorists Mutual Ins. Company Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Smithers, Ralph W., , , Jr. Date of Receipt Mailing Address 6418 Summers Nook Drive 10 2019 City State Zip Code Transaction ID: SA11AI.29643 New Albany OH 43054 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction **VP MAX Service** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Smithers, Ralph W., , , Jr. Date of Receipt Mailing Address 6418 Summers Nook Drive 13 2019 City Zip Code State Transaction ID: SA11AI.29686 OH New Albany 43054 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Ins. Company **VP MAX Service** Receipt For: Aggregate Year-to-Date ▼ Primary General

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may r ne name and addr	not be sold or used by any pess of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Smithers, Ralph W., , , Jr. Mailing Address 6418 Summers Nook Drive	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6418 Summers Nook Drive			11 26 2019
City	State	Zip Code	Transaction ID : SA11AI.29728
New Albany	ОН	43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Motorists Mutual Ins. Company	VP MAX	X Service	Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼	-	360.00]
Full Name of Individual (Last, First, Middle II) 3. Smithers, Ralph W., , , Jr.	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6418 Summers Nook Drive	1-		12 11 2019
City	State	Zip Code	Transaction ID : SA11AI.29770
New Albany	ОН	43054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Mutual Ins. Company		tion (for Individual) X Service	Memo Item Payroll Deduction
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼		375.00]
Full Name of Individual (Last, First, Middle II	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6418 Summers Nook Drive			12 24 2019
City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.29813
FEC ID number of contributing		.500	Amount of Each Receipt this Period
federal political committee.	C		15.00
Name of Employer (for Individual)		tion (for Individual)	Memo Item
Motorists Mutual Ins. Company Receipt For:	<u> </u>	K Service	Payroll Deduction
Primary General	Aggregate Yea	ar-to-Date ▼	_
Other (specify)			
SUBTOTAL of Receipts This Page (optional))	45.00
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any ne name and address of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUNI	D				
Full Name of Individual (Last, First, Middle Ir Walz, Chris, , , Mailing Address PO Box 832	nitial) or Full Organization Name	Date of Receipt				
011		07 10 2019				
City Hurricane	State Zip Code WV 25526	Transaction ID : SA11AI.29307				
	25520	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Brickstreet Insurance	AVP	Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	280.00					
Full Name of Individual (Last, First, Middle Ir Walz, Chris, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 832		07 26 7 2019				
City	State Zip Code WV 25526	Transaction ID : SA11Al.29351				
Hurricane	WV 25526	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Individual) AVP	Memo Item Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
Full Name of Individual (Last, First, Middle Ir	nitial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 832		08 07 2019				
City	State Zip Code	Transaction ID : SA11AI.29399				
Hurricane	WV 25526	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Brickstreet Insurance	AVP	Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)						
SUBTOTAL of Receipts This Page (optional)		60.00				
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY (CIVIC FUND	
Full Name of Individual (Last, First, Middle I Walz, Chris, , , Mailing Address PO Box 832	nitial) or Full Organization Na	me	Date of Receipt
			08 21 2019
City	State Zip Code		Transaction ID : SA11AI.29468
Hurricane	WV 25526		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual)	Occupation (for Ind	lividual)	Memo Item
Brickstreet Insurance	AVP		Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	7	
Primary General Other (specify) ▼		340.00	
Full Name of Individual (Last, First, Middle I Walz, Chris, , ,	nitial) or Full Organization Na	me	Date of Receipt
Mailing Address PO Box 832			09 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID : SA11AI.29473
Hurricane	WV 25526		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Inc	dividual)	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		360.00	
Full Name of Individual (Last, First, Middle I	nitial) or Full Organization Na	me	Date of Receipt
Mailing Address PO Box 832			09 18 2019
City Hurricane	State Zip Code WV 25526		Transaction ID : SA11AI.29515 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual)	Occupation (for Ind	lividual)	Memo Item
Brickstreet Insurance	AVP	,	Payroll Deduction
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify)		380.00	
SUBTOTAL of Receipts This Page (optional)		>	60.00
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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 2019 City Zip Code State Transaction ID: SA11AI.29587 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 10 16 2019 City State Zip Code Transaction ID: SA11AI.29600 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 10 30 2019 City Zip Code State Transaction ID: SA11AI.29642 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Brickstreet Insurance AVP Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional).....

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Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 2019 11 13 City Zip Code State Transaction ID: SA11AI.29685 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Brickstreet Insurance** Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 11 2019 City State Zip Code Transaction ID: SA11AI.29727 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brickstreet Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 480.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Walz, Chris, , , Date of Receipt Mailing Address PO Box 832 11 2019 City Zip Code State Transaction ID: SA11AI.29769 WV Hurricane 25526 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Brickstreet Insurance AVP Receipt For: Aggregate Year-to-Date ▼ Primary General

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Walz, Chris, , , Mailing Address PO Box 832	itial) or Full Organization Name	Date of Receipt
City	State Zip Code WV 25526	12 24 2019 Transaction ID : SA11AI.29812
Hurricane FEC ID number of contributing federal political committee.	WV 25526	Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) Brickstreet Insurance Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation (for Individual) AVP Aggregate Year-to-Date ▼ 520.00	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In White, Steven, , , Mailing Address 700 Chappell Rd.	itial) or Full Organization Name	Date of Receipt
City Charleston FEC ID number of contributing federal political committee.	State Zip Code WV 25304	Transaction ID : SA11AI.29867 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Encova Insurance	Occupation (for Individual) Board Member	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In White, Steven, , , Mailing Address 700 Chappell Rd.	State Zip Code	Date of Receipt 11 18 2019 Transaction ID : SA11Al.29860
Charleston FEC ID number of contributing federal political committee.	WV 25304	Amount of Each Receipt this Period
Name of Employer (for Individual) Encova Insurance Receipt For: Primary General Other (specify)	Occupation (for Individual) Board Member Aggregate Year-to-Date ▼ 500.00	Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)		520.00
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	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initi Wieland, Steve, , ,	ial) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 2811 Deverell Dr			07 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.29337
	Blacklick	ОН	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item
	Motorists Insurance Group	AVP	(Payroll Deduction
	Receipt For:		/a au ta Data 🔻	- Taylon Boadonen
	Primary General	Aggregate Y	/ear-to-Date ▼	
	Other (specify) ▼		210.00	
В.	Full Name of Individual (Last, First, Middle Initi Wieland, Steve, , ,	ial) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 2811 Deverell Dr			07 26 2019
	City	State	Zip Code	Transaction ID : SA11AI.29381
	Blacklick	OH	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual) Motorists Insurance Group	Occu	pation (for Individual)	Memo Item Payroll Deduction
	Receipt For:	Aggregate Y	∕ear-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Wieland, Steve, , ,	ial) or Full Or	ganization Name	Date of Receipt
•	Mailing Address 2811 Deverell Dr			08 07 2019
	City	State	Zip Code	Transaction ID : SA11AI.29423
	Blacklick	ОН	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item
	Motorists Insurance Group	AVP		Payroll Deduction
	Receipt For:		/ear-to-Date ▼	
	Primary General	Aggregate	ical to Bate 1	
	Other (specify)		240.00	
s	SUBTOTAL of Receipts This Page (optional)		>	45.00
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		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COMPANY CIVIC	FUND
Full Name of Individual (Last, First, Middle Wieland, Steve, , , Mailing Address 2811 Deverell Dr	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	08 21 2019 Transaction ID : SA11Al.29469
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25:	5.00
Full Name of Individual (Last, First, Middle Wieland, Steve, , , Mailing Address 2811 Deverell Dr	Initial) or Full Organization Name	Date of Receipt
Other	01-1- 7'- 0-1-	09 04 2019
City Blacklick	State Zip Code OH 43004	Transaction ID : SA11Al.29472 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name of Individual (Last, First, Middle Wieland, Steve, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 2811 Deverell Dr City	State Zip Code	09 18 2019 Transaction ID : SA11AI.29514
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 28	5.00
SUBTOTAL of Receipts This Page (optional).		45.00
TOTAL This Period (last page this line numb	er only)	

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Wieland, Steve, , , Mailing Address 2811 Deverell Dr City Blacklick FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43004 C Occupation (for Individual) AVP Aggregate Year-to-Date 300.00	Date of Receipt 10 02 2019 Transaction ID: SA11Al.29593 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle I Wieland, Steve, , , Mailing Address 2811 Deverell Dr City Blacklick FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle I	State Zip Code OH 43004 C Occupation (for Individual) AVP Aggregate Year-to-Date ▼ 315,00	Date of Receipt 10 16 2019 Transaction ID: SA11Al.29599 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
City Blacklick FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary Other (specify)	State Zip Code OH 43004 C Occupation (for Individual) AVP Aggregate Year-to-Date ▼	Date of Receipt 10 30 2019 Transaction ID: SA11Al.29641 Amount of Each Receipt this Period 15.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	45.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Wieland, Steve, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 2811 Deverell Dr		11 13 2019
City	State Zip Code	Transaction ID : SA11AI.29684
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance Group	AVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	345.00	
Full Name of Individual (Last, First, Middle Ir Wieland, Steve, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 2811 Deverell Dr		11 26 2019
City	State Zip Code	Transaction ID : SA11AI.29726
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360,00	
Full Name of Individual (Last, First, Middle Ir	nitial) or Full Organization Name	Date of Receipt
Mailing Address 2811 Deverell Dr		12 11 2019
City	State Zip Code	Transaction ID : SA11AI.29768
Blacklick	OH 43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) AVP	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify)	375.00	
SUBTOTAL of Receipts This Page (optional)		45.00
TOTAL This Period (last page this line number	· only)	

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Any information copied from such Reports and or for commercial purposes, other than using to			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Wieland, Steve, , , Mailing Address 2811 Deverell Dr	Initial) or Full Orga	anization Name	Date of Receipt
City	State	Zip Code	12 24 2019 Transaction ID : SA11Al.29811
Blacklick	OH	43004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa AVP	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 390.00	
Full Name of Individual (Last, First, Middle I Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Uni		nization Name	Date of Receipt
City	State	Zip Code	07 10 2019
Columbus	OH	43215	Transaction ID : SA11AI.29329 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 700.00]
Full Name of Individual (Last, First, Middle I	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 250 Daniel Burnham Sq Un			07 26 / Y Y Y Y Y Y
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29373
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa EVP	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (optional)			115.00
TOTAL This Period (last page this line number	er only)		

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	y information copied from such Reports and Stator commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CON	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initial Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit 30		anization Name	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City	State OH	Zip Code	Transaction ID : SA11AI.29417
	Columbus FEC ID number of contributing federal political committee.	С	43215	Amount of Each Receipt this Period 50.00
	Name of Employer (for Individual) Motorists Insurance Group	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼	Taylon Beddonon
В.	Full Name of Individual (Last, First, Middle Initial Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit 30		anization Name	Date of Receipt 08 21 2019
	City	State	Zip Code	Transaction ID : SA11Al.29470
	Columbus	ОН	43215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Motorists Insurance Group	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼			
<u>С</u>	Full Name of Individual (Last, First, Middle Initial Wilcox, Matt, , ,	al) or Full Org	anization Name	Date of Receipt
	Mailing Address 250 Daniel Burnham Sq Unit 30	08		09 / 04 / 2019
	City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29471 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Motorists Insurance Group	Occup EVP	ation (for Individual)	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 900.00	
H	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			150.00

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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ir Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) EVP Aggregate Year-to-Date ▼ 950.00	Date of Receipt 09 18 2019 Transaction ID: SA11AI.29513 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Ir Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) EVP Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 02 2019 Transaction ID: SA11Al.29584 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	· ·	Date of Receipt 10 16 2019 Transaction ID: SA11AI.29598 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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Use separate schedule(s) for each category of the

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Detailed Summary Page 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) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilcox, Matt, , , Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 308 2019 City Zip Code State Transaction ID: SA11AI.29640 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wilcox, Matt, , , Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 308 2019 City State Zip Code Transaction ID: SA11AI.29683 Columbus OH 43215 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1150.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wilcox, Matt, , , Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 308 26 2019 City Zip Code State Transaction ID: SA11AI.29725 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group **EVP** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not the name and addre	ot be sold or used by any pess of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COM	PANY CIVIC FUND			
Wilcox, Matt, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit 308				
City	State	Zip Code	12 11 2019 Transaction ID : SA11Al.29767		
Columbus	OH	43215	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual) Motorists Insurance Group	Occupat EVP	ion (for Individual)	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	nr-to-Date ▼ 1250.00			
Full Name of Individual (Last, First, Middle Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Ur		nization Name	Date of Receipt		
City	State	Zip Code	12 24 2019		
Columbus	OH	43215	Transaction ID : SA11AI.29810 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual) Motorists Insurance Group	Occupat EVP	tion (for Individual)	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 1300.00]		
Full Name of Individual (Last, First, Middle C. Wiseman, Michael L., , ,	Initial) or Full Organ	nization Name	Date of Receipt		
Mailing Address 90 Timberknoll Loop	11 18 2019				
City Powell	State OH	Zip Code 43065	Transaction ID : SA11AI.29864		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer (for Individual) Motorists Mutual Ins Company	Occupat Sr VP	ion (for Individual)	Memo Item Payroll Deduction		
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 1000.00]		
SUBTOTAL of Receipts This Page (optional))	1100.00		
TOTAL This Period (last page this line numb	per only)		17775.00		

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SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 185 OF 186				
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(orlean orr					
		d Summary Page	21b		23 26 27 28c x 29 30b			
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NAME OF COMMITTEE (In Full)								
$ \; angle$ MOTORISTS MUTUAL INSURAI	NCE CO	MPANY CIV	IC FUND					
Full Name (Look First Middle Initial)								
Full Name (Last, First, Middle Initial) A. Brinkman Campaign Committee	,							
	M M	/ D D / Y Y Y Y Y						
Mailing Address 3215 Hardisty Ave	Mailing Address 3215 Hardisty Ave							
City	State	Zip Code						
Cincinnati	OH	45208		FEC Iden	tification Number			
Purpose of Disbursement				С				
Campaign Contribution					saction ID : SB29.29291			
Candidate Name			Category/	Amount of Each Disbursement this Period				
Office Sought: House Disburs	sement For:		Туре		1000.00			
Senate	Primary	General			7 7 7			
President	Other (sp			Mome	o Item			
State: District:				Ivierric) item			
Full Name (Last, First, Middle Initial)								
B. Committee to Elect Mitch Carmic	hael	ael			Date of Disbursement			
Mailing Address 206 Cedar Lakes Dr.	Dr				08 14 2019			
Mailing Address 200 Cedal Lakes Dr.	ţc							
City	State	·			tification Number			
Ripley Purpose of Disbursement	WV	25271		C				
Campaign Contribution								
Candidate Name		Category/ Type nent For: Primary General Other (specify)			Transaction ID: SB29.29288 Amount of Each Disbursement this Period			
					1000.00			
	sement For:							
Senate President								
State: District:	_ Other (sp	oechy)		Memo	o Item			
Full Name (Last, First, Middle Initial)								
C. French for Justice	Date of Disbursement							
	M M	/ D D / Y D Y D Y						
Mailing Address 100 South Third Street		09	29 2019					
City	State	Zip Code		EEC Idon	tification Number			
Columbus	ОН	43215		FEC Identification Number				
Purpose of Disbursement Campaign Contribution								
Candidate Name		saction ID : SB29.29292						
Canadate Hame	Amount o	f Each Disbursement this Period						
Office Sought: House Disburs	Type	11:::	1000.00					
Senate	Primary	General			7 7 7			
President	Other (sp	pecify) ▼		Memo	o Item			
State: District:								
SUPTOTAL of Dishurasments This Dags (antique)	`				3000.00			
SUBTOTAL of Disbursements This Page (optional)		······		300.00			
TOTAL This Period (last page this line number on	lv)							

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 186 OF 186					
ITEMIZED DISBURSEMENTS		parate schedule(s)) FOR LINE (check only	THO MIDELLE.				
		category of the Summary Page	21b					
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NAME OF COMMITTEE (In Full)	and all all	aroos or arry politi	ioai committee t	, somet contributions from such confinites.				
MOTORISTS MUTUAL INSURA	NCE COI	MPANY CIV	IC FUND					
/		/	.5.0.10					
Full Name (Last, First, Middle Initial)	Date of Dishursement							
A. Kennedy for Ohio	Date of Disbursement							
Mailing Address 211 S. Fifth Street	09 29 2019							
City	State	Zip Code		EEC Identification Number				
Columbus	ОН	43215		FEC Identification Number				
Purpose of Disbursement Campaign Contribution				C				
Candidate Name				Transaction ID : SB29.29293				
Salidate Halle			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disbur	sement For:		.,,,,	1000.00				
Senate	Primary	General		Memo Item				
President Pietriet:	Other (spe	ecify) 🔻						
State: District:								
Full Name (Last, First, Middle Initial) B. Peterson for Good Government				Date of Disbursement				
I eleison foi Good Government				M M / D D / Y Y Y				
Mailing Address 5564 Grassy Branch Rd.	Mailing Address 5564 Grassy Branch Rd.							
	T-: :	T= :						
City Sabina	State OH	Zip Code 45169		FEC Identification Number				
Purpose of Disbursement	1 3	70100		C				
Campaign Contribution				Transaction ID : SB29.29294				
Candidate Name			Category/	Amount of Each Disbursement this Period				
Office Sought: House Disbur	sement For:		Туре	500.00				
Senate Disbur	Primary	General		300.00				
President	ecify)		D					
State: District:				Memo Item				
Full Name (Last, First, Middle Initial)								
C. Roger Hanshaw for House				Date of Disbursement				
Mailing Address 5341 Wallback Rd				08 14 2019				
aming / taa. 555 5541 Wallback Nu	Walling Address 3341 Wallback Ku							
City	State	Zip Code		FEC Identification Number				
Wallback Purpose of Disbursement								
Campaign Contribution	C Town of the Open coord							
Candidate Name	Transaction ID : SB29.29289 Amount of Each Disbursement this Period							
	sement For:			1000.00				
Senate President	Other (spe	General						
State: District:	Outer (spe			Memo Item				
SUBTOTAL of Disbursements This Page (optiona	ıl)			2500.00				
				757000				
TOTAL This Period (last page this line number or	nly)			5500.00				