

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00544817

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2013 through 12 / 31 / 2013

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

Signature of Treasurer Mark Schwamberger [Electronically Filed] Date 01 / 29 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="99490.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="216200.00"/>	<input type="text" value="323200.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="315690.00"/>	<input type="text" value="323200.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="70030.00"/>	<input type="text" value="77540.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="245660.00"/>	<input type="text" value="245660.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	216050.00	323050.00
(ii) Unitemized .....	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	216200.00	323200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	216200.00	323200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	216200.00	323200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	216200.00	323200.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	30.00	40.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30.00	40.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	70000.00	77500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	70030.00	77540.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70030.00	77540.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	216200.00	323200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	216200.00	323200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	30.00	40.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30.00	40.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Steve Aguilar**  
Full Name (Last, First, Middle Initial)

Mailing Address 717 Pendragon Ct

City Franklin State TN Zip Code 37067-3400

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

Name of Employer STATE FARM Occupation OVP - CLAIMS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2013

**Transaction ID : 36539BC02B244D7BA585**

Amount of Each Receipt this Period  
 2500.00

**B. Kimberly J. Allen**  
Full Name (Last, First, Middle Initial)

Mailing Address 2041 Echo Pl

City San Ramon State CA Zip Code 94582-4832

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2013

**Transaction ID : 230C1E63D09A441CA769**

Amount of Each Receipt this Period  
 1500.00

**C. Victor L. Anger**  
Full Name (Last, First, Middle Initial)

Mailing Address 43149 Tall Pines Ct

City Ashburn State VA Zip Code 20147-6601

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2013

**Transaction ID : B708E1FAB8E94F439288**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John P. Antonacci**  
Full Name (Last, First, Middle Initial)

Mailing Address 315 Tarbert Dr

City West Chester State PA Zip Code 19382-2501

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES ADMINISTRATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
10 / 21 / 2013  
Transaction ID : **F4E8527A70B7434BB8EE**

Amount of Each Receipt this Period  
1500.00

**B. Michael Arnold**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Chloe Ct

City Bloomington State IL Zip Code 61704-8666

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
09 / 13 / 2013  
Transaction ID : **9052345917434EF9A5D1**

Amount of Each Receipt this Period  
1500.00

**C. Sandy Arnold**  
Full Name (Last, First, Middle Initial)

Mailing Address 43 Stonebrook Ct

City Bloomington State IL Zip Code 61704-4156

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

Name of Employer STATE FARM Occupation ISD VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
08 / 20 / 2013  
Transaction ID : **11438F4A36864F2BBBDE**

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jean M. Baird**  
Full Name (Last, First, Middle Initial)

Mailing Address 1302 Old Hawthorne Dr W

City Columbia State MO Zip Code 65201-0007

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2013

**Transaction ID : 0444E166648040C1BB3A**

Amount of Each Receipt this Period  
 1500.00

**B. Dean Barry**  
Full Name (Last, First, Middle Initial)

Mailing Address 912 N 980 W

City Orem State UT Zip Code 84057-7706

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : AF58976FED00480EACDB**

Amount of Each Receipt this Period  
 1500.00

**C. Jeff S. Barton**  
Full Name (Last, First, Middle Initial)

Mailing Address 8603 NE 154th Cir

City Battle Ground State WA Zip Code 98604-5249

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2013

**Transaction ID : 9C4A60257F9C42AEB8D0**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Art Beckman**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Silverberry Ct

City Bloomington State IL Zip Code 61704-4701

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 24 / 2013  
**Transaction ID : E9CDBC6DE8D2468BA393**

Amount of Each Receipt this Period 1500.00

**B. David Beigie**  
Full Name (Last, First, Middle Initial)

Mailing Address 3101 Fiona Way

City Bloomington State IL Zip Code 61704-7011

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

Name of Employer STATE FARM Occupation VP - PUBLIC AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 15 / 2013  
**Transaction ID : 83B111D030024502B1BE**

Amount of Each Receipt this Period 2500.00

**C. Kelly L. Bever**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 Caladonia Ct

City Bloomington State IL Zip Code 61704-4185

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 03 / 2013  
**Transaction ID : B26C2B97357B4E828CE3**

Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Rendi R. Black**  
Full Name (Last, First, Middle Initial)

Mailing Address 6208 Avalon Woods Dr

City McKinney State TX Zip Code 75070-8788

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
07 / 17 / 2013  
Transaction ID : 096E3C5A46AD410D8DB8

Amount of Each Receipt this Period  
1500.00

**B. Steve L. Black**  
Full Name (Last, First, Middle Initial)

Mailing Address 2315 Knollbrook Way

City Bloomington State IL Zip Code 61705-6305

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
11 / 20 / 2013  
Transaction ID : 5E5725CEB21F4E3289F6

Amount of Each Receipt this Period  
1500.00

**C. Becky R. Blevins**  
Full Name (Last, First, Middle Initial)

Mailing Address 150 Cedar Knoll Ct

City Blythewood State SC Zip Code 29016-8652

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
10 / 04 / 2013  
Transaction ID : 614EDEF1B753400CACE4

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Julie Bolton**  
Full Name (Last, First, Middle Initial)

Mailing Address 1110 Bluffhaven Way NE

City Atlanta State GA Zip Code 30319-4819

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

Name of Employer STATE FARM Occupation OVP - UNDERWRITING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2013

**Transaction ID : EBB680D0AB14462DBBE5**

Amount of Each Receipt this Period  
 2500.00

**B. Robert Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 Pin Oak Dr

City Chadds Ford State PA Zip Code 19317-7387

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2013

**Transaction ID : 7CBDFC3FD CDF41049B64**

Amount of Each Receipt this Period  
 1500.00

**C. Katinka M. M. Bryson**  
Full Name (Last, First, Middle Initial)

Mailing Address 7110 N Central Ave

City Phoenix State AZ Zip Code 85020-4812

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : E557245DA0D147BDAD7F**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. King K. Butler**  
Full Name (Last, First, Middle Initial)

Mailing Address 1111 Ascott Valley Dr

City Johns Creek State GA Zip Code 30097-5923

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013

**Transaction ID : 7CD6A4B55B664D09B946**

Amount of Each Receipt this Period  
 1500.00

**B. Janine J. Chapa**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 Sutton Pl

City Georgetown State TX Zip Code 78628-1991

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2013

**Transaction ID : FCA15E4F61354D1BA52F**

Amount of Each Receipt this Period  
 1500.00

**C. Priscilla Clark**  
Full Name (Last, First, Middle Initial)

Mailing Address 106 Verrena Way

City Georgetown State TX Zip Code 78628-1265

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 85674C140FEE44BE8779**

Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Mark H. Cockerham**  
Full Name (Last, First, Middle Initial)

Mailing Address 7930 Oakbrook Dr

City Baton Rouge State LA Zip Code 70810-1808

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : 97CD67E6B1DF4D94BDDA**

Amount of Each Receipt this Period  
 1500.00

**B. Kristyn Cook-Turner**  
Full Name (Last, First, Middle Initial)

Mailing Address 6812 Dakota Trl

City Edina State MN Zip Code 55439-1121

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2013

**Transaction ID : C9C8CCCD7C0A4EA0BC9F**

Amount of Each Receipt this Period  
 1500.00

**c. Chris A. Cressy**  
Full Name (Last, First, Middle Initial)

Mailing Address 8506 Cedar Hills Dr

City Dexter State MI Zip Code 48130-9347

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2013

**Transaction ID : ABFD9194DD8E4E0E8683**

Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Peggy A. Echols**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3697 Newbridge Rd  
City Keswick State VA Zip Code 22947-9201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation VPO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 19 / 2013  
**Transaction ID : A11BC189EE4946E7BD34**  
Amount of Each Receipt this Period 1500.00

**B. Paul N. Eckley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 200 William Dr  
City Normal State IL Zip Code 61761-1851  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation SR VP - INVESTMENTS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 24 / 2013  
**Transaction ID : F14BA36E583F4F2C8339**  
Amount of Each Receipt this Period 5000.00

**C. Jon C. Farney**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3313 Peppertree Ln  
City Bloomington State IL Zip Code 61704-8387  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation OVP - UNDERWRITING  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 16 / 2013  
**Transaction ID : 8DFC8838797B429FA445**  
Amount of Each Receipt this Period 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Ron C. Fluker**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Weaver Ct

City Bloomington State IL Zip Code 61704-8379

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

Name of Employer STATE FARM Occupation AGENCY VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
09 / 11 / 2013  
**Transaction ID : DDCA06436C3647549033**

Amount of Each Receipt this Period  
2500.00

**B. Eileen H. Flynn**  
Full Name (Last, First, Middle Initial)

Mailing Address 13706 47th Avenue Ct NW

City Gig Harbor State WA Zip Code 98332-9138

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
07 / 23 / 2013  
**Transaction ID : 30B5C69F52F04A7FB1F3**

Amount of Each Receipt this Period  
1500.00

**C. Joe P. Formusa**  
Full Name (Last, First, Middle Initial)

Mailing Address 755 S Clayton St

City Denver State CO Zip Code 80209-4809

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

Name of Employer STATE FARM Occupation SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
10 / 15 / 2013  
**Transaction ID : 268C07E1E22B466EAC30**

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Reggie R. Gallant**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Leaforth Ct

City Irmo State SC Zip Code 29063-7927

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES ADMINISTRATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2013  
**Transaction ID : 93F0E64FDDE9436DAAC4**

Amount of Each Receipt this Period  
 1500.00

**B. Charlie R. Gomez**  
Full Name (Last, First, Middle Initial)

Mailing Address 1519 Belfiore Way

City Windermere State FL Zip Code 34786-8134

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2013  
**Transaction ID : 3B5CA5D94D134931ADAC**

Amount of Each Receipt this Period  
 1500.00

**C. Virginia C. Gonzales**  
Full Name (Last, First, Middle Initial)

Mailing Address 917 Marcassin Dr

City Columbia State MO Zip Code 65201-7237

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2013  
**Transaction ID : 2B7780421B8B42A6B7AA**

Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David C. Graves**  
Full Name (Last, First, Middle Initial)

Mailing Address 13796 Antler Ct

City Bloomington State IL Zip Code 61705-7809

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

Name of Employer STATE FARM Occupation VP-MORTGAGES & REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013

**Transaction ID : AABBB303E7794D60A711**

Amount of Each Receipt this Period  
 2500.00

**B. Christopher L. Gude**  
Full Name (Last, First, Middle Initial)

Mailing Address 8729 Chapel Hill Dr

City Ellicott City State MD Zip Code 21043-1972

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2013

**Transaction ID : 18491852B9584681AF84**

Amount of Each Receipt this Period  
 1500.00

**C. Mike J. Hargis**  
Full Name (Last, First, Middle Initial)

Mailing Address 14501 Falcon Head Blvd  
Unit 43

City Bee Cave State TX Zip Code 78738-6696

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : 55963EC5AA7E47B59E81**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Phillip G. Hawkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7216 Oak Shores Dr  
 City Austin State TX Zip Code 78730-4315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : EE4F81F930A84F908FB8**  
 Amount of Each Receipt this Period  
 4000.00

**B. Wensley J. J. Herbert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2004 Wakefield Ln  
 City Bloomington State IL Zip Code 61704-9198  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2013  
**Transaction ID : 5B1D4EC87DD64120AB61**  
 Amount of Each Receipt this Period  
 1500.00

**C. David C. Hernandez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12613 Holland Park St  
 City Bakersfield State CA Zip Code 93312-5755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013  
**Transaction ID : 15BE58ADA2AD49E4A6BF**  
 Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Cheryl R. Herrin**  
Full Name (Last, First, Middle Initial)

Mailing Address 2507 W Gardner Ct

City Tampa State FL Zip Code 33611-4774

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

Name of Employer STATE FARM Occupation OVP - CLAIMS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013

**Transaction ID : 1160D4C223C84D01B92E**

Amount of Each Receipt this Period  
 2500.00

**B. Kim R. Hicks**  
Full Name (Last, First, Middle Initial)

Mailing Address 3645 N Sagewood Cir

City Mesa State AZ Zip Code 85207-6948

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2013

**Transaction ID : 6069DD1BC899428B851A**

Amount of Each Receipt this Period  
 1500.00

**C. Arlene Dresch D. Hogan**  
Full Name (Last, First, Middle Initial)

Mailing Address 11908 47th Avenue Ct NW

City Gig Harbor State WA Zip Code 98332-7914

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

Name of Employer STATE FARM Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2013

**Transaction ID : A04292141E3D4BA6B2B5**

Amount of Each Receipt this Period  
 4000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Michael Holmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 1575 Spalding Dr

City State Zip Code  
Sandy Springs GA 30350-4213

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

Name of Employer Occupation  
STATE FARM OVP - CLAIMS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 11 / 2013  
**Transaction ID : 01E8017CA203438CBEC1**

Amount of Each Receipt this Period  
1000.00

**B. Rita N. Howard**  
Full Name (Last, First, Middle Initial)

Mailing Address 15903 Amis Ct

City State Zip Code  
Austin TX 78734-2650

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

Name of Employer Occupation  
STATE FARM VP - AGENCY/SALES SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
09 / 16 / 2013  
**Transaction ID : 5422153588AF479E9B73**

Amount of Each Receipt this Period  
1500.00

**C. Todd T. Hoyt**  
Full Name (Last, First, Middle Initial)

Mailing Address 4412 Esquire Cir

City State Zip Code  
Naperville IL 60564-6144

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

Name of Employer Occupation  
STATE FARM VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
09 / 10 / 2013  
**Transaction ID : 7474895AAB324159800E**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jeffrey W. W. Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17511 Sandpiper St  
 City Hudson State IL Zip Code 61748-7621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation SVP AND GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : B7B47209547E4A94BE5A**  
 Amount of Each Receipt this Period 5000.00

**B. Patty L. Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5003 Old Stump Dr NW  
 City Gig Harbor State WA Zip Code 98332-7801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VP-AGENCY/SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 11 / 2013  
**Transaction ID : 9783933FB8314139ABAE**  
 Amount of Each Receipt this Period 1500.00

**C. Leonard L. L. Kaigler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27612 Manor Hill Rd  
 City Laguna Niguel State CA Zip Code 92677-6045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VP-AGENCY/SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 30 / 2013  
**Transaction ID : 505481E504704B3DBD9C**  
 Amount of Each Receipt this Period 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jim P. Kinkade**  
Full Name (Last, First, Middle Initial)

Mailing Address 3445 Camellia Ln

City Suwanee State GA Zip Code 30024-5348

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : 475EDBE08CEB484BA0EC**

Amount of Each Receipt this Period  
 1500.00

**B. Mike W. Kish**  
Full Name (Last, First, Middle Initial)

Mailing Address 1701 E Empire St # 360-337

City Bloomington State IL Zip Code 61704-3532

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

Name of Employer STATE FARM Occupation VICE PRESIDENT AGENCY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : 090A5FAFE2EE43ADA340**

Amount of Each Receipt this Period  
 1500.00

**C. Dan J. Krause**  
Full Name (Last, First, Middle Initial)

Mailing Address 18399 Kingsmill St

City Leesburg State VA Zip Code 20176-3948

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2013

**Transaction ID : ACBA6205EBA540AFBB93**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Susan A. Krieger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 Keswick Dr  
 City New Albany State OH Zip Code 43054-8076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2013  
**Transaction ID : 052EAE581E4E4FB6874E**  
 Amount of Each Receipt this Period  
 1500.00

**B. Laura Kunewa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10453 N 118th Pl  
 City Scottsdale State AZ Zip Code 85259-5033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VP-AGENCY/SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2013  
**Transaction ID : 4D7AA85433FA40D796FA**  
 Amount of Each Receipt this Period  
 1500.00

**C. Ken Lam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2005 Foxtail Rd  
 City Bloomington State IL Zip Code 61704-1537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation OVP - UNDERWRITING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2013  
**Transaction ID : 3976DB46309C4AB889BB**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Mike E. Larkin**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 MacKenzie Ct

City Bloomington State IL Zip Code 61704-7047

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2013

**Transaction ID : 91BEC305AEB149AB92EB**

Amount of Each Receipt this Period  
 2500.00

**B. Debra K. Larson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 S 98th St

City Lincoln State NE Zip Code 68520-9432

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2013

**Transaction ID : CD01F458674D4DEDA804**

Amount of Each Receipt this Period  
 500.00

**C. Dianne Lerman**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 Carney Ct

City Bloomington State IL Zip Code 61704-8352

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013

**Transaction ID : FE5440682F5B428CAEDC**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Julie S. Maloy**  
Full Name (Last, First, Middle Initial)

Mailing Address 2946 Daventry Ln

City Charlottesville State VA Zip Code 22911-5778

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 16 / 2013  
Transaction ID : 12FEDE2D465146B2BBD1

Amount of Each Receipt this Period 1500.00

**B. Kurt L. Mamon**  
Full Name (Last, First, Middle Initial)

Mailing Address 109 Hidden Pond Way

City West Chester State PA Zip Code 19382-7145

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2013  
Transaction ID : 7228523654EE42CE91F5

Amount of Each Receipt this Period 1500.00

**C. Annette R. R. Martinez**  
Full Name (Last, First, Middle Initial)

Mailing Address 2613 Crooked Creek Rd

City Bloomington State IL Zip Code 61705-6396

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

Name of Employer STATE FARM Occupation VP - HUMAN RESOURCES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 03 / 2013  
Transaction ID : A4A931CC48F641D68657

Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Will R. Martinez**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Heritage Blvd

City Edmond State OK Zip Code 73025-2764

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
08 / 05 / 2013  
**Transaction ID : 12814C845F364BD988D4**

Amount of Each Receipt this Period  
1500.00

**B. Rod M. Matthews**  
Full Name (Last, First, Middle Initial)

Mailing Address 3301 Wisteria Ln

City Bloomington State IL Zip Code 61704-2787

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

Name of Employer STATE FARM Occupation P&C OPERATIONS VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
12 / 13 / 2013  
**Transaction ID : 183706B2DD164A08B04E**

Amount of Each Receipt this Period  
2500.00

**C. Kevin H. McKay**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 Brookridge Ct

City Bloomington State IL Zip Code 61704-6293

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

Name of Employer STATE FARM Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
09 / 09 / 2013  
**Transaction ID : 01FABD7FBFE34E8E8C13**

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

**A. John Monsanto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 192 Shannon Oaks Dr  
 City Lakeland State FL Zip Code 33813-5664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2013  
**Transaction ID : FE3601D76CC34D67BE8B**  
 Amount of Each Receipt this Period  
 1500.00

**B. Sue Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Greenbriar Ln  
 City Kennett Sq State PA Zip Code 19348-1556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2013  
**Transaction ID : FC270B83C04A4FCE92A2**  
 Amount of Each Receipt this Period  
 1500.00

**C. Julia M. Muscott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 Majestic Cv  
 City Milton State GA Zip Code 30004-4568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013  
**Transaction ID : D75C73D272CD41C3957C**  
 Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Mark Oakley**  
Full Name (Last, First, Middle Initial)

Mailing Address 9 Flint Ct

City Bloomington State IL Zip Code 61705-8830

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

Name of Employer STATE FARM Occupation SYSTEMS VICE PRESIDENT & CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2013  
**Transaction ID : 7CE1EED0EA6C4F4B8908**

Amount of Each Receipt this Period  
 4000.00

**B. Dick K. Paul**  
Full Name (Last, First, Middle Initial)

Mailing Address 3611 Armstrong Dr

City Bloomington State IL Zip Code 61704-2837

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

Name of Employer STATE FARM Occupation VP-LIFE/HEALTH & MUTUAL FUNDS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2013  
**Transaction ID : 9879AD4DBF3A4C66ACF7**

Amount of Each Receipt this Period  
 2500.00

**C. Susie A. Pinkard**  
Full Name (Last, First, Middle Initial)

Mailing Address 2460 Flint Creek Dr

City Cumming State GA Zip Code 30041-6329

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

Name of Employer STATE FARM Occupation VP - AGENCY/SALES SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2013  
**Transaction ID : CE5E55B3B3B047EA82E7**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John T. Raube**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Rockford Crossing Dr

City Kennett Sq State PA Zip Code 19348-1360

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 08 / 2013  
**Transaction ID : 940F3E8550224BC2AA46**

Amount of Each Receipt this Period 1500.00

**B. Javier A. Rey**  
Full Name (Last, First, Middle Initial)

Mailing Address 5320 N 25th St

City Phoenix State AZ Zip Code 85016-3608

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 03 / 2013  
**Transaction ID : 83B20610C85B4052A9FB**

Amount of Each Receipt this Period 1500.00

**C. Sonya J. Robinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 16021 Caenen St

City Overland Park State KS Zip Code 66062-7860

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 27 / 2013  
**Transaction ID : 1E031559EB36466691ED**

Amount of Each Receipt this Period 850.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Leif Roll**

Mailing Address 2113 Currant Ct

City Bloomington State IL Zip Code 61704-2717

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

Name of Employer STATE FARM Occupation MARKETING VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2013  
**Transaction ID : 4D0A2337CE3B4618B2EE**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. Bill W. Roundtree**

Mailing Address 912 Town and Country Estts Ct

City Saint Louis State MO Zip Code 63141-8838

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 19 / 2013  
**Transaction ID : 2C5FAB4F5F2046E59FF7**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**C. Theresa B. Royster**

Mailing Address 125 Rossmore Dr

City Malvern State PA Zip Code 19355-3179

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2013  
**Transaction ID : 4858333E60444106A8FE**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Michele C. Russo**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 Stony Brook Dr

City State Zip Code  
Saratoga Springs NY 12866-6445

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

Name of Employer Occupation  
STATE FARM VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
07 / 16 / 2013  
**Transaction ID : A6BC7B6977BE47EC850C**

Amount of Each Receipt this Period  
1500.00

**B. Ed B. Rust**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 Downing Cir

City State Zip Code  
Bloomington IL 61704-7619

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

Name of Employer Occupation  
STATE FARM CHAIRMAN & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 05 / 2013  
**Transaction ID : 341A0E8B7FAB48DB9CDC**

Amount of Each Receipt this Period  
5000.00

**C. Sarah E. Rust**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 Downing Cir

City State Zip Code  
Bloomington IL 61704-7619

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

Name of Employer Occupation  
HOME MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 05 / 2013  
**Transaction ID : 9A0D64B5ADA54C68806F**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Joy L. L. Schreder**  
Full Name (Last, First, Middle Initial)

Mailing Address 1630 Locust Hills Pl

City Wayzata State MN Zip Code 55391-1972

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

Name of Employer STATE FARM Occupation AREA VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
08 / 16 / 2013  
**Transaction ID : 8FAF5854C244454B9CD2**

Amount of Each Receipt this Period  
2500.00

**B. Suzanne L. Shambrook**  
Full Name (Last, First, Middle Initial)

Mailing Address 4055 N Recker Rd Unit 71

City Mesa State AZ Zip Code 85215-7795

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES ADMINISTRATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
11 / 08 / 2013  
**Transaction ID : 20F817EBC8CD40E1BCE9**

Amount of Each Receipt this Period  
1500.00

**C. Jeff L. Shay**  
Full Name (Last, First, Middle Initial)

Mailing Address 9579 Hampton Reserve Dr

City Brentwood State TN Zip Code 37027-8485

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
12 / 31 / 2013  
**Transaction ID : 7DBAD79152874530B3DD**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Barney Shultz**  
Full Name (Last, First, Middle Initial)

Mailing Address 6926 N Upper Skyline Dr

City Peoria State IL Zip Code 61614-2220

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

Name of Employer STATE FARM Occupation VICE PRESIDENT - COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2013

**Transaction ID : 2C7EF068E5324EBE8B31**

Amount of Each Receipt this Period  
1500.00

**B. Carra J. Simmons**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Derby Way

City Bloomington State IL Zip Code 61704-2821

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

Name of Employer STATE FARM Occupation VP- LEARNING & DVLPMT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2013

**Transaction ID : 1E1F56733F4A4C908CAD**

Amount of Each Receipt this Period  
2500.00

**c. Doug C. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 11710 51st Ave NW

City Gig Harbor State WA Zip Code 98332-8201

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

Name of Employer STATE FARM Occupation OVP - CLAIMS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 13 / 2013

**Transaction ID : 6ED1471892C349ACB353**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mike J. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 Ironwood Cc Dr  
 City Normal State IL Zip Code 61761-5270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation PRESIDENT & CEO - SFFSB  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 07 / 03 / 2013  
**Transaction ID : 02EFE00DB66F46E7949D**  
 Amount of Each Receipt this Period 4000.00

**B. Angela K. K. Sparks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 Crooked Creek Ct  
 City Bloomington State IL Zip Code 61705-6310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation OVP - UNDERWRITING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 08 / 2013  
**Transaction ID : 2929386134DA4A2080E0**  
 Amount of Each Receipt this Period 2500.00

**C. Rob E. Stewart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2808 Laurel Ests  
 City Baton Rouge State LA Zip Code 70820-5758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation AREA VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 23 / 2013  
**Transaction ID : E70AC24E4FC141C2930A**  
 Amount of Each Receipt this Period 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Shyama N. N. Terry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12 Smokey Ct  
City Bloomington State IL Zip Code 61704-2706  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation OVP - CLAIMS  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 07 / 18 / 2013  
**Transaction ID : 030DE3A3F6B145AFAB3B**  
Amount of Each Receipt this Period 2500.00

**B. Victor A. Terry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2812 Stevenson Dr  
City Bloomington State IL Zip Code 61704-9199  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation AGENCY VICE PRESIDENT  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 08 / 05 / 2013  
**Transaction ID : 3F286CEA0455422B9A3F**  
Amount of Each Receipt this Period 2500.00

**C. Elizabeth Tharp**  
Full Name (Last, First, Middle Initial)  
Mailing Address 929 Winding Way  
City Middleton State WI Zip Code 53562-5078  
FEC ID number of contributing federal political committee. **C**  
Name of Employer STATE FARM Occupation VP-AGENCY/SALES  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 11 / 08 / 2013  
**Transaction ID : D59A01D283234AAB9F1C**  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Alex J. Thompson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1305 Castle Dr

City Lafayette State IN Zip Code 47905-8891

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 10 / 2013  
**Transaction ID : 1510C69B6C654C8C9ECC**

Amount of Each Receipt this Period 1500.00

**B. Michael Tipsord**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Windsong Way

City Bloomington State IL Zip Code 61704-8350

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

Name of Employer STATE FARM Occupation VICE CHAIRMAN & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2013  
**Transaction ID : D6859A09B6374B02B33B**

Amount of Each Receipt this Period 5000.00

**C. Troy W. Turner**  
Full Name (Last, First, Middle Initial)

Mailing Address 3865 Valley Crest Dr

City Timnath State CO Zip Code 80547-2234

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

Name of Employer STATE FARM Occupation VPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 23 / 2013  
**Transaction ID : 26B676C7B35F4DD88B86**

Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Colleen R. Van Dyke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5910 Fairview Pl  
 City Agoura Hills State CA Zip Code 91301-1850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation AREA VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2013  
**Transaction ID : 099D605791894B6DA130**  
 Amount of Each Receipt this Period  
 2500.00

**B. Carol Waldron**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 Berry Ln  
 City Bloomington State IL Zip Code 61704-2790  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VPO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 1C44F46155FB47D4B032**  
 Amount of Each Receipt this Period  
 1500.00

**C. Michael S. Wang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 336 Cottswald Ct  
 City Danville State CA Zip Code 94506-2088  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VP - AGENCY/SALES SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2013  
**Transaction ID : 1006E37D4992479D863D**  
 Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Patrick R. Warren**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 Windward Way

City State Zip Code  
Nicholasville KY 40356-8027

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

Name of Employer Occupation  
STATE FARM VP-AGENCY/SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
09 / 10 / 2013  
Transaction ID : AAD34A0EEBFD4A1D91C1

Amount of Each Receipt this Period  
1200.00

**B. Jack W. Watts**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 Arbor Ct

City State Zip Code  
Bloomington IL 61704-9113

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

Name of Employer Occupation  
STATE FARM OVP - UNDERWRITING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
09 / 10 / 2013  
Transaction ID : 2DD7EA740E824B39BB52

Amount of Each Receipt this Period  
2500.00

**C. Jack H. Weekes**  
Full Name (Last, First, Middle Initial)

Mailing Address 3208 Trumpet Ln

City State Zip Code  
Bloomington IL 61704-2754

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

Name of Employer Occupation  
STATE FARM OPERATIONS VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
07 / 03 / 2013  
Transaction ID : 8B51DFEFE0BF4DF9B912

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Jack H. Weekes**  
Full Name (Last, First, Middle Initial)

Mailing Address 3208 Trumpet Ln

City Bloomington State IL Zip Code 61704-2754

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

Name of Employer STATE FARM Occupation OPERATIONS VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 22 / 2013  
**Transaction ID : 546E8118A244459D9407**

Amount of Each Receipt this Period 1500.00

**B. Kimberly N. White**  
Full Name (Last, First, Middle Initial)

Mailing Address 6210 Burnham Cir

City Colleyville State TX Zip Code 76034-7716

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

Name of Employer STATE FARM Occupation VP-AGENCY/SALES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 17 / 2013  
**Transaction ID : 82A95CC3E33D433297E2**

Amount of Each Receipt this Period 1500.00

**C. Robert H. Yi**  
Full Name (Last, First, Middle Initial)

Mailing Address 3616 Tahoe Ct

City Normal State IL Zip Code 61761-9573

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

Name of Employer STATE FARM Occupation SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 07 / 01 / 2013  
**Transaction ID : E167F384D7EE48BA8201**

Amount of Each Receipt this Period 4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

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

FOR LINE NUMBER: PAGE 40 OF 61  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Joe Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3664 Yellowstone Dr  
 City Normal State IL Zip Code 61761-9571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation VICE PRESIDENT - FIXED INCOME  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2013  
**Transaction ID : 4AEC90EED69241F7B891**  
 Amount of Each Receipt this Period  
 3000.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	216050.00



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Adrian Smith for Congress**

Mailing Address 3321 Avenue I  
Suite 6

City State Zip Code  
Scottsbluff NE 69361-4587

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Adrian M. Smith**

Office Sought:  House  
 Senate  
 President  
State: NE District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1FA7577D2EEE252F2DB**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Andy Barr for Congress, Inc.**

Mailing Address PO Box 2059

City State Zip Code  
Lexington KY 40588

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Garland Hale Barr IV**

Office Sought:  House  
 Senate  
 President  
State: KY District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : B31586A67229A3B65F9**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Beatty for Congress**

Mailing Address PO Box 172

City State Zip Code  
Columbus OH 43216

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Joyce Beatty**

Office Sought:  House  
 Senate  
 President  
State: OH District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 4349E73A3825BAB0D7D**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bennet for Colorado**

Mailing Address PO Box 3078

City Denver State CO Zip Code 80201

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Michael F. Bennet**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2013			

**Transaction ID : 35C764F2BBCF218E05B**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bill Foster for Congress**

Mailing Address PO Box 9104

City Aurora State IL Zip Code 60598

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Bill Foster**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			19			2013			

**Transaction ID : 717BBC08C4434487850**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Bill Nelson for U S Senate**

Mailing Address 972 W Whitmire Drive

City Melbourne State FL Zip Code 32935

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Bill Nelson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: FL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2013			

**Transaction ID : 0E1D68FC85865FBF9C5**

Amount of Each Disbursement this Period

1000.00
---------

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

3000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bob Corker for Senate 2018 Inc**

Mailing Address 1015 Stonebridge Park Drive

City Franklin State TN Zip Code 37069

Purpose of Disbursement  
2018 Primary

011

Candidate Name  
**Bob Corker**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: TN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2013			

**Transaction ID : 5F30A2267BF74F47546**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bob Goodlatte for Congress Committee**

Mailing Address PO Box 292

City Roanoke State VA Zip Code 24002

Purpose of Disbursement  
2014 Primary

011

Candidate Name  
**Robert William Goodlatte**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			16			2013			

**Transaction ID : 13AB1F50B155088B3E6**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Capuano for Congress Committee**

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
2014 Primary

011

Candidate Name  
**Michael Everett Capuano**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2013			

**Transaction ID : 734562566378C4FCADF**

Amount of Each Disbursement this Period

1000.00
---------

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

3000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Chris Coons for Delaware**

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Christopher Andrew Coons**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : F9E5EC77866B707DB28**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Clay Jr. for Congress**

Mailing Address PO Box 4544

City St. Louis State MO Zip Code 63108

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**William Lacy Clay Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 01

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2013

**Transaction ID : 7A0C102D184808E0D43**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Dave Camp for Congress**

Mailing Address 5915 Eastman Avenue  
Suite 100

City Midland State MI Zip Code 48640-6824

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**David Lee Camp**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 04

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2013

**Transaction ID : 5F67F3F0543000BEDBF**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David Vitter for US Senate**

Mailing Address PO Box 8175

City Metairie State LA Zip Code 70011

Purpose of Disbursement  
2016 Primary

011  
Category/  
Type

Candidate Name  
**David Vitter**

Office Sought:  House  Senate  President  
State: LA District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

**Transaction ID : 13C01E556FB7C947614**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Families for James Lankford**

Mailing Address PO Box 1639

City Bethany State OK Zip Code 73008

Purpose of Disbursement  
2014 Primary

011  
Category/  
Type

Candidate Name  
**James Lankford**

Office Sought:  House  Senate  President  
State: OK District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2013

**Transaction ID : B9E4654DE58D7CEA9BC**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Fitzpatrick for Congress**

Mailing Address PO Box 185

City Langhorne State PA Zip Code 19047-0185

Purpose of Disbursement  
2014 Primary

011  
Category/  
Type

Candidate Name  
**Michael G. Fitzpatrick**

Office Sought:  House  Senate  President  
State: PA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2013

**Transaction ID : 34BF51062BBC582763D**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Bennie Thompson**

Mailing Address PO Box 100

City Bolton State MS Zip Code 39041

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Bennie G. Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Date of Disbursement

MM / DD / YYYY  
12 / 13 / 2013

**Transaction ID : 19A33B1D433C70B580A**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Friends of Dick Durbin**

Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Richard J. Durbin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2013

**Transaction ID : 48EAB75428C5BCEEE68**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Dick Durbin**

Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Richard J. Durbin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2013

**Transaction ID : 5EAB6102447938B8F95**

Amount of Each Disbursement this Period

4000.00

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of John Delaney**

Mailing Address PO Box 70835

City State Zip Code  
Bethesda MD 20813

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**John K. Delaney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MD District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	3

**Transaction ID : E6161BC2A2739CE7FDA**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Friends of Pat Toomey**

Mailing Address 228 S. Washington St., Suite 115

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Patrick Joseph Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	1	3

**Transaction ID : 8EAE92DB6FEA311365A**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Friends of Sherrod Brown**

Mailing Address PO Box 15293

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
2018 General

011

Candidate Name

**Sherrod Brown**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	3

**Transaction ID : 4138934E1F50DF8EB3B**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gary Miller for Congress**

Mailing Address 721 S Brea Canyon Rd Ste 7

City State Zip Code  
Diamond Bar CA 91789

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Gary G. Miller**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2013			

**Transaction ID : 56B75FBEA4AD2C13845**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Hoyer for Congress**

Mailing Address 700 13th Street, NW  
Suite 600

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Steny H. Hoyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2013			

**Transaction ID : C0D624549C6E5D5AD5D**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Huizenga for Congress**

Mailing Address 441 Williams Court

City State Zip Code  
Zeeland MI 49464-1509

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**William P. Huizenga**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2013			

**Transaction ID : 2D548CE39518737142E**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeff Flake for US Senate Inc**

Mailing Address PO Box 12512

City: Tempe State: AZ Zip Code: 85284-0042

Purpose of Disbursement  
2018 General

Category/  
Type

Candidate Name

**Jeff Flake**

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/  /

**Transaction ID : C179A89F5045BB8A074**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jeff Fortenberry for United States Congress**

Mailing Address PO Box 30265

City: Lincoln State: NE Zip Code: 68503

Purpose of Disbursement  
2014 Primary

Category/  
Type

Candidate Name

**Jeff Fortenberry**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NE District: 01

Date of Disbursement

/  /

**Transaction ID : B6E2A7F67093D553D21**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. John Carney for Congress**

Mailing Address PO Box 2162

City: Wilmington State: DE Zip Code: 19899

Purpose of Disbursement  
2014 Primary

Category/  
Type

Candidate Name

**John Charles Carney Jr.**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DE District: 01

Date of Disbursement

/  /

**Transaction ID : 3916D98150E0751C7DD**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kevin McCarthy for Congress**

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Kevin McCarthy**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

Transaction ID : DD63ED29CE9C65E123D

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kevin McCarthy for Congress**

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Kevin McCarthy**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			23			2013			

Transaction ID : CC98755E26C6C1FC843

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kinzinger for Congress**

Mailing Address PO Box 2365

City Ottawa State IL Zip Code 61350-6965

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Adam Kinzinger**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2013			

Transaction ID : A19939EBEB7F444EF78

Amount of Each Disbursement this Period

1000.00
---------

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

7000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kirk for Senate**

Mailing Address PO Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Mark Steven Kirk**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : B93F420BB5559233D6B**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Kyrsten Sinema**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 09

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2013

**Transaction ID : C9772442DC40C429C99**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Lofgren for Congress**

Mailing Address C/O Contribution Solutions, Llc  
123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Zoe Lofgren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 19

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 46A166143E41B27616C**

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marcia Fudge for Congress**

Mailing Address 3729 Silsby Rd

City University Heights State OH Zip Code 44118-3647

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Marcia L. Fudge**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	3

**Transaction ID : 585FA80064AA5F79DF9**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Mario Diaz-Balart for Congress**

Mailing Address 8770 SW 72nd Street  
# 420

City Miami State FL Zip Code 33173-3512

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Mario Diaz-Balart**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 25

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	1	3

**Transaction ID : BC04750844ABE5C26FD**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Mike Crapo for US Senate**

Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Michael D. Crapo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ID District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	1	3

**Transaction ID : 8F5203D50B794A614CB**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Neugebauer Congressional Committee**

Mailing Address PO Box 54175

City Lubbock State TX Zip Code 79453-4175

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Robert Randolph Neugebauer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 6F85AB895D0F77C3000**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Palazzo for Congress**

Mailing Address 13155 Highway 67 Suite B

City Biloxi State MS Zip Code 39532

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Steven M. Palazzo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2013

**Transaction ID : E7C98368AE4506EBF83**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. People for Derek Kilmer**

Mailing Address PO Box 1574

City Gig Harbor State WA Zip Code 98335

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Derek Kilmer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2013

**Transaction ID : F949A792D7B9779DC29**

Amount of Each Disbursement this Period

2500.00
---------

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

4500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Pete Sessions for Congress**

Mailing Address PO Box 823047

City Dallas State TX Zip Code 75382-3047

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Peter Anderson Sessions**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2013			

Transaction ID : D130D14FD06434F2766

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Randy Hultgren for Congress**

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174-0717

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Randall M. Hultgren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2013			

Transaction ID : 7817534C6B0F7A8FF3B

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Reed Committee**

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Jack Francis Reed**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: RI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2013			

Transaction ID : 76C1B7500BCFCEFA48A

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Robert Hurt for Congress**

Mailing Address PO Box 8

City Chatham State VA Zip Code 24531-0008

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name  
**Robert Hurt**

Office Sought:  House  
 Senate  
 President  
State: VA District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2013

**Transaction ID : 4B9F4AB7BB25358CE5F**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Rodney for Congress**

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568-0344

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name  
**Rodney L. Davis**

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2013

**Transaction ID : DAE7027A6A017AD9998**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Rodney for Congress**

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568-0344

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name  
**Rodney L. Davis**

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2013

**Transaction ID : 7FE37A86D2A81FBFA0A**

Amount of Each Disbursement this Period

500.00

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

2500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Rodney for Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568-0344

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Rodney L. Davis**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2013			

Transaction ID : AF8D634C4520F04EB49

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B. Roskam for Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Peter J. Roskam**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2013			

Transaction ID : B1B1FAA2534486DCC53

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### C. Ryan for Congress, Inc.

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547-1488

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Paul Ryan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2013			

Transaction ID : F722A3A25FB24055ACF

Amount of Each Disbursement this Period

1000.00
---------

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

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Salmon for Congress**

Mailing Address PO Box 1290

City: Mesa State: AZ Zip Code: 85211

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Matt Salmon**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 05

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 459DA2CE4BF83775990**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Schneider for Congress**

Mailing Address PO Box 1318

City: Deerfield State: IL Zip Code: 60015

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Bradley Scott Schneider**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2013

**Transaction ID : 1D2AACBA3BFB1F0EBBC**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Schock for Congress**

Mailing Address PO Box 10555

City: Peoria State: IL Zip Code: 61612

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Aaron Schock**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2013

**Transaction ID : 727B726583E0B3105C3**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Schock for Congress**

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Aaron Schock**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2013			

Transaction ID : C353E024D13F1DE0BBA

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Schock for Congress**

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Aaron Schock**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2013			

Transaction ID : D7578739A202E53BAA9

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Sires for Congress**

Mailing Address 6050 Blvd. East  
Apt. 6B

City West New York State NJ Zip Code 07093

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Albio Sires**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2013			

Transaction ID : A36C3749C018549AFD4

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Steve Fincher for Congress

Mailing Address PO Box 11153

City Jackson State TN Zip Code 38308

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Stephen Lee Fincher**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2013			

Transaction ID : **BB8C3505CE471387245**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B. Stivers for Congress

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220-8113

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Steve Stivers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2013			

Transaction ID : **6381CF783287AB125D2**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### C. Stutzman for Congress

Mailing Address PO Box 129

City Howe State IN Zip Code 46746

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Marlin Andrew Stutzman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2013			

Transaction ID : **F4632298A0D4C5FF1E7**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Terri Sewell for Congress**

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Terri A. Sewell**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2013

**Transaction ID : C286A97136B74526567**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Terri Sewell for Congress**

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Terri A. Sewell**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 26 / 2013

**Transaction ID : D5DF24A40E3F8811BDD**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Tiberi for Congress**

Mailing Address 2931 E Dublin Granville Road  
Suite 190

City Columbus State OH Zip Code 43231-2098

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Patrick J. Tiberi**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2013

**Transaction ID : FA82F2888C9034DC6EA**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Vargas for Congress

Mailing Address 330 Encinitas Blvd., Suite 101

City Encinitas State CA Zip Code 92024

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Juan C. Vargas**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2013			

Transaction ID : E11F2A9F2C2C8A445EE

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

1000.00
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**TOTAL** This Period (last page this line number only)..... ▶

70000.00
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