

**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 44 OF 65
	<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)  
**National Association of Mutual Insurance Companies PAC**

**A. Mr. Richard D. Rasmussen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 31  
 City Harlan State IA Zip Code 51537-0031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Shelby County Farmers Mutual Insurance Occupation Secretary/Treasurer/Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2015  
**Transaction ID : A3531FEB890DA411F8ED**  
 Amount of Each Receipt this Period  
 250.00

**B. Mr. Gordon Rehnberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Bouton St  
 City Concord State NH Zip Code 03301-5006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Concord General Mutual Insurance Compa Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2015  
**Transaction ID : A091ED2A89FC24F0E915**  
 Amount of Each Receipt this Period  
 250.00

**C. Mr. Kenneth Riesch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1900 S 18th Ave  
 City West Bend State WI Zip Code 53095-8796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer West Bend Mutual Insurance Company Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2015  
**Transaction ID : A4E8461DBE5614006B35**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	