

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) One State Farm Plaza c/o Mark Schwamberger, Treasurer, Bloomington IL 61710-0001

2. FEC IDENTIFICATION NUMBER C00544817 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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 11 / 24 / 2020 through 12 / 31 / 2020

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

Signature of Treasurer Schwamberger, Mark, , , [Electronically Filed] Date 01 / 19 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="199798.34"/>	<input type="text" value="199798.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="199945.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="38246.48"/>	<input type="text" value="418515.77"/>
(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="238192.45"/>	<input type="text" value="618314.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3450.00"/>	<input type="text" value="383571.66"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="234742.45"/>	<input type="text" value="234742.45"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y
11 / 24 / 2020 To: M M / D D / Y Y Y Y
12 / 31 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	31981.26	370404.10
(ii) Unitemized	6265.22	48111.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	38246.48	418515.77
(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)	38246.48	418515.77
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)).....▶	38246.48	418515.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	38246.48	418515.77

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	55.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	55.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4250.00	313250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	6466.66
(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	6466.66
29. Other Disbursements (Including Non-Federal Donations).....	- 800.00	63800.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3450.00	383571.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3450.00	383571.66

DETAILED SUMMARY PAGE
of Disbursements

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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)	38246.48	418515.77
34. Total Contribution Refunds (from Line 28(d))	0.00	6466.66
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38246.48	412049.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	55.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	55.00

**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 92
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Adams, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9300 Poundstone PI

City Greenwood Village	State CO	Zip Code 80111-3410
---------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 41D3A25084837EB334B6

Amount of Each Receipt this Period
 25.00

Memo Item

B. Adams, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9300 Poundstone PI

City Greenwood Village	State CO	Zip Code 80111-3410
---------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 12 / 30 / 2020
Transaction ID : 471AB2A61652AE835E08

Amount of Each Receipt this Period
 25.00

Memo Item

C. Aslanides, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5421 W Devon Ave

City Chicago	State IL	Zip Code 60646-4105
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-33

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Aslanides, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5421 W Devon Ave
 City Chicago State IL Zip Code 60646-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-36
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Barrera, Danny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3360 S Wadsworth Blvd Ste 110
 City Lakewood State CO Zip Code 80227-5164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 249.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-6
 Amount of Each Receipt this Period
 20.83
 Memo Item

C. Barrera, Danny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3360 S Wadsworth Blvd Ste 110
 City Lakewood State CO Zip Code 80227-5164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 249.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-6
 Amount of Each Receipt this Period
 20.83
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	91.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Begole, Randy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 W Forrest Hill Ave
 City Peoria State IL Zip Code 61604-1640
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-39
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Berna, Susanna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2020
Transaction ID : 45E8A9F19F1B9850130C
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Berna, Susanna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Brittany Ct
 City Bloomington State IL Zip Code 61704-8367
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2020
Transaction ID : 4F06B169D564A7F636F8
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 9 OF 92
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

A. Bessette, Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 Garden Ter
 City Shorewood State IL Zip Code 60404-9480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2020
Transaction ID : 462AADD67FE2B03CB7E8
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. Bigger, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 N 7th St
 City Wyoming State IL Zip Code 61491-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-17
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Bigger, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 N 7th St
 City Wyoming State IL Zip Code 61491-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-17
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Boje, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 Glen Creek Rd NW
 City Salem State OR Zip Code 97304-3134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-84
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Boje, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 Glen Creek Rd NW
 City Salem State OR Zip Code 97304-3134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-93
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Bossch, Milt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1918 E Coconino Dr
 City Chandler State AZ Zip Code 85249-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Agency/Sales Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 16 / 2020**
Transaction ID : 439CB14C818273791908
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bowers, Lorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68935 Gateway Dr
 City Edwardsburg State MI Zip Code 49112-9491
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-85
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Brown, Russell, P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 Panorama Dr
 City Medford State OR Zip Code 97504-5638
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2020
Transaction ID : 478B929612B5364F9559
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Bruno, David A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15452 Long Dr
 City Bloomington State IL Zip Code 61705-5439
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Legal Operations Director
 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
 12 / 29 / 2020
Transaction ID : DE31BABA-6DEF-428C-
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Bryson, Katinka M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Country Club Pl
 City Bloomington State IL Zip Code 61701-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Agency Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.84

Date of Receipt 12 / 05 / 2020
Transaction ID : 404BB3C9BC242FF4BCA9
 Amount of Each Receipt this Period 208.32
 Memo Item

B. Burtis, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Fieldcrest Dr
 City East Peoria State IL Zip Code 61611-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 05 / 2020
Transaction ID : 441DBFE9C25A557216A7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Butler, King, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Ascott Valley Dr
 City Johns Creek State GA Zip Code 30097-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 28 / 2020
Transaction ID : 46089FEAB543A7160C09
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	383.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Butler, King, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Ascott Valley Dr
 City Johns Creek State GA Zip Code 30097-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 28 / 2020**
Transaction ID : 44D395BCAA05ED291C71
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Callis, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Pebblebrook Ct
 City Bloomington State IL Zip Code 61705-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **11 / 27 / 2020**
Transaction ID : 4E089DEA36D90591E8A1
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Callis, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Pebblebrook Ct
 City Bloomington State IL Zip Code 61705-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 27 / 2020**
Transaction ID : 4D7AB4283938CD9CD23A
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 14 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Carlson, Jessie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 Meadow Ct NE
 City Albany State OR Zip Code 97322-3502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 07 / 2020
Transaction ID : 459E8EC64EFDEAFD838D
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Cavanaugh, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 Hackberry Rd
 City Bloomington State IL Zip Code 61704-2788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vice President - Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 4B7C93ED22BB875613A0
 Amount of Each Receipt this Period 750.00
 Memo Item

C. Cegon, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2061 Wiltsey Ct SE
 City Salem State OR Zip Code 97306-6903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 11 / 2020
Transaction ID : 401AB94200A9AFB932CF
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	870.00
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 92
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Cimons, Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 H St
 City Alexandria State VA Zip Code 22307-1434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Leadership Development Assoc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1458.28

Date of Receipt **12 / 21 / 2020**
Transaction ID : 418A8B1CAC5AC1D3406C
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Clawson, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 36th Ave
 City Moline State IL Zip Code 61265-7168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-49
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Clawson, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 36th Ave
 City Moline State IL Zip Code 61265-7168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-55
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Conklin, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 Hurff Dr
 City Elmwood State IL Zip Code 61529-9812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2020
Transaction ID : 4FFBA8B5AD8719556600
 Amount of Each Receipt this Period
 600.00
 Memo Item

B. Convery, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1521 Stoneroller Cir
 City Bloomington State IL Zip Code 61705-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Leadership Enterprise Dev Assc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2020
Transaction ID : EA5857C4-A2BB-42C6-
 Amount of Each Receipt this Period
 350.00
 Memo Item

C. Cooper, Allison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Deer Lakes Ct
 City Goodfield State IL Zip Code 61742-9753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Claim Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : DAD2BCCF-C800-4652-
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 17 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Cronin, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 286 W Coulter Rd
 City Lapeer State MI Zip Code 48446-8691
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 12 / 08 / 2020
Transaction ID : 46EAA1D5AA6EDAEBBFC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Dacosta, Tori, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2438 N Beech Ln
 City Greensboro State NC Zip Code 27455-1274
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 4EFPD19C-5265-413D-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Debacker, Al, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 Irwin Ct N
 City Keizer State OR Zip Code 97303-7471
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 360.00

Date of Receipt 12 / 11 / 2020
Transaction ID : 49E194F535F8377B4B27
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	380.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Dorsett, Rayman, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 Lakeshore Ave
 Apt 5

City Oakland State CA Zip Code 94606-1079

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2020

Transaction ID : 4315833FAE25D41E415A

Amount of Each Receipt this Period
 125.00

Memo Item

B. Downie, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18335 NW West Union Rd
 Ste J

City Portland State OR Zip Code 97229-2199

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : 2020112011535-87

Amount of Each Receipt this Period
 50.00

Memo Item

C. Downie, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18335 NW West Union Rd
 Ste J

City Portland State OR Zip Code 97229-2199

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 2020122211295-96

Amount of Each Receipt this Period
 50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Edwards, Devonne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8904 Montmedy Ct
 City Bakersfield State CA Zip Code 93311-1580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Agency Administration Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.84

Date of Receipt **12 / 16 / 2020**
Transaction ID : 4B9DA5AA20E5AF863B86
 Amount of Each Receipt this Period 20.82
 Memo Item

B. Eggers, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1840 NE Commercial Ave
 City Roseburg State OR Zip Code 97470-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.84

Date of Receipt **11 / 30 / 2020**
Transaction ID : 46CE89BB8ED8F14D89EF
 Amount of Each Receipt this Period 20.82
 Memo Item

C. Eggers, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1840 NE Commercial Ave
 City Roseburg State OR Zip Code 97470-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.84

Date of Receipt **12 / 30 / 2020**
Transaction ID : 4D8389102577204AF0B2
 Amount of Each Receipt this Period 20.82
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	62.46
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Elam, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 S Calhoun St
 City Fort Wayne State IN Zip Code 46802-5255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-56
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Elam, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 S Calhoun St
 City Fort Wayne State IN Zip Code 46802-5255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-63
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Elsberg, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2575 37th Ave
 City Rock Island State IL Zip Code 61201-6923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 22 / 2020**
Transaction ID : 47F495A81D3C0FF501DC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Evans, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9129 S 83rd Ave
 City Hickory Hills State IL Zip Code 60457-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2020
Transaction ID : 7AF2B0AC3B0746C39641
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Fahlberg, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6909 W Deford Rd
 City Dunlap State IL Zip Code 61525-9767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2020
Transaction ID : 405CB797C8CBA9E0A38B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Fatzynytyz, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Pecan Ln
 City Oak Ridge State NJ Zip Code 07438-9164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 9DD52105-8942-4FCE-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1625.00
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 22 OF 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Fields, Josh, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5645 W 79th St

City Indianapolis	State IN	Zip Code 46278-1711
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 2020112011535-61

Amount of Each Receipt this Period

Memo Item

B. Fields, Josh, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5645 W 79th St

City Indianapolis	State IN	Zip Code 46278-1711
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 2020122211295-68

Amount of Each Receipt this Period

Memo Item

C. Finch, Paul, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 SE 3rd St

City Bend	State OR	Zip Code 97702-2143
--------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 2020112011535-77

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Finch, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 SE 3rd St
 City Bend State OR Zip Code 97702-2143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-86
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Fletcher, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6509 Alderbrook Pl
 City McKinney State TX Zip Code 75071-6884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Enterprise Technology Exec
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1066.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2020
Transaction ID : 4CF786CAA65F5DE4B437
 Amount of Each Receipt this Period
 83.32
 Memo Item

C. Foley, Solomon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5411 E State St Ste 200
 City Rockford State IL Zip Code 61108-2376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-22
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	158.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 92
<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

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

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

A. Foley, Solomon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5411 E State St
 Ste 200
 City Rockford State IL Zip Code 61108-2376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-23
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Frati, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1934 Newmark St
 Ste B
 City North Bend State OR Zip Code 97459-1274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-80
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Frati, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1934 Newmark St
 Ste B
 City North Bend State OR Zip Code 97459-1274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-89
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 92
	<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	

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

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

A. Frederickson, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9430 Central Park Ave
 City Evanston State IL Zip Code 60203-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **12 / 04 / 2020**
Transaction ID : 44AC987D90183D9FAFC7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Fry, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4765 Front St Ste C
 City Castle Rock State CO Zip Code 80104-7938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Fry, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4765 Front St Ste C
 City Castle Rock State CO Zip Code 80104-7938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Fugate, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 590 Highway 133

City Carbondale	State CO	Zip Code 81623-1644
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-3

Amount of Each Receipt this Period
 25.00

Memo Item

B. Fugate, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 590 Highway 133

City Carbondale	State CO	Zip Code 81623-1644
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-3

Amount of Each Receipt this Period
 25.00

Memo Item

C. Furlani, Al, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1720 Central Ave

City Columbus	State IN	Zip Code 47201-5326
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-66

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 1594 Edgewater St NW
 Ste 170

City Salem State OR Zip Code 97304-4656

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-78

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 1594 Edgewater St NW
 Ste 170

City Salem State OR Zip Code 97304-4656

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-87

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 3735 Reiniger Rd

City Hatboro State PA Zip Code 19040-1641

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 812.74

Date of Receipt
 12 / 18 / 2020
Transaction ID : 4C04A99BA5A386C1F6E0

Amount of Each Receipt this Period
 83.32

Memo Item

SUBTOTAL of Receipts This Page (optional).....	183.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Gourley, Corkey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39091 McKenzie Hwy
 City Springfield State OR Zip Code 97478-8603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 15 / 2020**
Transaction ID : 4D84B7B55D9606A39EAE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Gourley, Josh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5921 Landmark Ln
 City Eugene State OR Zip Code 97402-7570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 29 / 2020**
Transaction ID : 4B8A9A5B72FF823C6668
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Gourley, Josh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5921 Landmark Ln
 City Eugene State OR Zip Code 97402-7570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 29 / 2020**
Transaction ID : 45C2A79BF112E5398120
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Grow, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3000 Strolling Hills Rd

City Cameron Park	State CA	Zip Code 95682-9640
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2020

Transaction ID : 44B49FD5FF11272ED9D9

Amount of Each Receipt this Period
 20.00

Memo Item

B. Grubb, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1026 E M 21

City Owosso	State MI	Zip Code 48867-9007
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : 2020112011535-72

Amount of Each Receipt this Period
 100.00

Memo Item

C. Grubb, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1026 E M 21

City Owosso	State MI	Zip Code 48867-9007
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 2020122211295-81

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Hagemann, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 SW Garden Home Rd
 City Portland State OR Zip Code 97223-9599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-88
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Hagemann, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 SW Garden Home Rd
 City Portland State OR Zip Code 97223-9599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-97
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Hall, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6518 N Windmont Ave
 City Parker State CO Zip Code 80134-5937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 12 / 22 / 2020
Transaction ID : 4CE899AAF406822EBD3A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 31 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Han, Vu, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 NE 82nd Ave

City Portland	State OR	Zip Code 97220-6006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2020

Transaction ID : 2020112011535-85

Amount of Each Receipt this Period
25.00

Memo Item

B. Han, Vu, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 NE 82nd Ave

City Portland	State OR	Zip Code 97220-6006
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

Transaction ID : 2020122211295-94

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 111 S 47th St

City Springfield	State OR	Zip Code 97478-6625
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2020

Transaction ID : 2020112011535-79

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 32 OF 92
(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 (State Farm Federal PAC)

A. Hanan, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 S 47th St
 City Springfield State OR Zip Code 97478-6625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 2020122211295-88
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Harper, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9713 SW Capitol Hwy
 City Portland State OR Zip Code 97219-5253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 30 / 2020
Transaction ID : 2020112011535-89
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Harper, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9713 SW Capitol Hwy
 City Portland State OR Zip Code 97219-5253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 2020122211295-98
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Harris, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5295 Dark Hollow Rd
 City Medford State OR Zip Code 97501-9627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2020
Transaction ID : 4145A937B6FE4BF7AF97
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Herbert, Wensley J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) State Farm Occupation (for Individual) Ovp - Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2020
Transaction ID : 4CEFBFCAD4A7D6D55308
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Herren, Blake, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4008 Highland Oaks Ln
 City Cleburne State TX Zip Code 76031-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 507.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2020
Transaction ID : 4364A56500791E367906
 Amount of Each Receipt this Period
 46.14
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	221.14
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Herren, Blake, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4008 Highland Oaks Ln
 City Cleburne State TX Zip Code 76031-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.54

Date of Receipt **12 / 28 / 2020**
Transaction ID : 45AAAF0FBA28EC1C75
 Amount of Each Receipt this Period 46.14
 Memo Item

B. Higa-Seaver, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6125 Odell St
 City Cumming State GA Zip Code 30040-5707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Ccc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.16

Date of Receipt **11 / 29 / 2020**
Transaction ID : 4817AE313B7C6378AC6D
 Amount of Each Receipt this Period 57.68
 Memo Item

C. Higa-Seaver, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6125 Odell St
 City Cumming State GA Zip Code 30040-5707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Ccc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 692.16

Date of Receipt **12 / 29 / 2020**
Transaction ID : 4B8DA5C3DF3B13299E03
 Amount of Each Receipt this Period 57.68
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	161.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Horvath, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8415 Blackwood Dr
 City Windsor State CO Zip Code 80550-4699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2020
Transaction ID : 4FCE8975877C4BAD88F7
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Hume, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 Old Grand Ave
 City Gurnee State IL Zip Code 60031-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-16
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Hume, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 Old Grand Ave
 City Gurnee State IL Zip Code 60031-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-16
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Isuani, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3729 N Wilton Ave
 Apt 1N
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2749.96

Date of Receipt 12 / 15 / 2020
 Transaction ID : 4FB9BD79F111779D3FF4
 Amount of Each Receipt this Period 83.32
 Memo Item

B. Janese, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1243 S Douglas Ave
 City Arlington Heights State IL Zip Code 60005-3252
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 291.62

Date of Receipt 12 / 04 / 2020
 Transaction ID : 4B1E96D7C67D8B715CA0
 Amount of Each Receipt this Period 41.66
 Memo Item

C. Jason, Launey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 Staghorne Way
 City Bloomington State IL Zip Code 61705-7510
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Leadership Enterprise Dev Assc
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 458.26

Date of Receipt 12 / 09 / 2020
 Transaction ID : 4578B117BDBA01B4CF5C
 Amount of Each Receipt this Period 83.32
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 208.30
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Jelen, Nicolette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 31st St
 City Westchester State IL Zip Code 60154-5111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-19
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Jelen, Nicolette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 31st St
 City Westchester State IL Zip Code 60154-5111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-20
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Johnson, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6035 E 17th Avenue Pkwy
 City Denver State CO Zip Code 80220-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2020
Transaction ID : 4A1C8120369256455E9F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 38 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kasten, Luke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5N226 Prairie Lakes Blvd
 City St Charles State IL Zip Code 60175-7941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **12 / 16 / 2020**
Transaction ID : 40BABA0D7DFAC8B3EA11
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Kazi, Awan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18994 Bryant Rd
 City Lake Oswego State OR Zip Code 97034-7222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 20 / 2020**
Transaction ID : 4A9899B090B335BA737E
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Keating, Michael T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Rose Trce
 City Saratoga Spgs State NY Zip Code 12866-6537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **12 / 14 / 2020**
Transaction ID : 4CA5A17A8438C8E88D1E
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kelley, Patty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24140 Dameron Rd

City Lexington	State IL	Zip Code 61753-7609
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Director - Creative Services
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 4B668D59DDB55AE02FE6

Amount of Each Receipt this Period
 250.00

Memo Item

B. Kibler, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3861 Briar Patch Ln

City Galesburg	State MI	Zip Code 49053-9781
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2020

Transaction ID : 47189DBB0BF92174C1B0

Amount of Each Receipt this Period
 20.00

Memo Item

C. Kibler, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3861 Briar Patch Ln

City Galesburg	State MI	Zip Code 49053-9781
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2020

Transaction ID : 4C8392FAC135A969896F

Amount of Each Receipt this Period
 20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
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 40 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Kindred, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 N Towanda Barnes Rd
 City Bloomington State IL Zip Code 61705-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Hr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **12 / 30 / 2020**
Transaction ID : 2E2F589A-B9B4-4555-
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Klinkhamer, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 Main St
 City Rochester State IN Zip Code 46975-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-58
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Klinkhamer, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 Main St
 City Rochester State IN Zip Code 46975-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-65
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1350.00
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 41 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Korgan, Malyka, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11052 Cimarron St
 Unit B
 City Firestone State CO Zip Code 80504-6682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-12
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. Korgan, Malyka, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11052 Cimarron St
 Unit B
 City Firestone State CO Zip Code 80504-6682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-12
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Krier, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 Valley Butte Dr
 City Eugene State OR Zip Code 97401-7833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2020
Transaction ID : 457EA4EBE98CFF989A0A
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 42 OF 92
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Kurtenbach, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 E 300N Rd
 City Gibson City State IL Zip Code 60936-7130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2020
Transaction ID : 450E8A7BA00539245B9F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Lasky, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1607 E Washington St
 City Bloomington State IL Zip Code 61701-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Enterprise Initiatives
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2020
Transaction ID : 4D9C98E6F1A0DDEB3864
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Lavin, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 E Golf Rd
 City Schaumburg State IL Zip Code 60173-4511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-40
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 43 OF 92
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Lavin, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 721 E Golf Rd

City Schaumburg	State IL	Zip Code 60173-4511
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-45

Amount of Each Receipt this Period
 50.00

Memo Item

B. Loftus, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Tiger Lily Ln

City Cape Eliz	State ME	Zip Code 04107-5107
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Area Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2307.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2020
Transaction ID : 4A6F9DDE65E30923CFDD

Amount of Each Receipt this Period
 192.30

Memo Item

C. Loftus, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Tiger Lily Ln

City Cape Eliz	State ME	Zip Code 04107-5107
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Area Vice President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 2307.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2020
Transaction ID : 4E3EB20D3584226D09F1

Amount of Each Receipt this Period
 192.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....	434.60
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 45 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Macdonald, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4758 Main St
 City Lisle State IL Zip Code 60532-2094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-44
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Macdonald, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4758 Main St
 City Lisle State IL Zip Code 60532-2094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-38
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Manning, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 NW Birkendene St
 City Portland State OR Zip Code 97229-8081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1107.60

Date of Receipt
 12 / 23 / 2020
Transaction ID : 4AC28721963EB469D0EF
 Amount of Each Receipt this Period 92.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	192.30
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 46 OF 92
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Marshall, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6016 Garver Rd
 City Indianapolis State IN Zip Code 46208-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1008.32

Date of Receipt 12 / 14 / 2020
Transaction ID : 481E8F07E44435C4B7E4
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Marteeny, Rick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Bear Creek Ct
 City Glen Carbon State IL Zip Code 62034-1377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.62

Date of Receipt 12 / 05 / 2020
Transaction ID : 4840B8C60FA1258B58DB
 Amount of Each Receipt this Period 41.66
 Memo Item

C. Martin, Jordan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 Terry St
 City Longmont State CO Zip Code 80501-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 30 / 2020
Transaction ID : 2020112011535-9
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 166.66
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 47 OF 92
(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 (State Farm Federal PAC)

A. Martin, Jordan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 Terry St
 City Longmont State CO Zip Code 80501-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-9
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Martinez, Art, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7444 W Chatfield Ave Ste E
 City Littleton State CO Zip Code 80128-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-4
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Martinez, Art, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7444 W Chatfield Ave Ste E
 City Littleton State CO Zip Code 80128-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-4
 Amount of Each Receipt this Period
 25.00
 Memo Item

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

75.00

**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 48 OF 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mathison, Deann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 Old Orchard Ln
 City Springfield State OR Zip Code 97477-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 07 / 2020
Transaction ID : 4AED83EAD64B866D5D46
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Mazun, Lidia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11106 SE Scotts Summit Ct
 City Happy Valley State OR Zip Code 97086-9105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 02 / 2020
Transaction ID : 47BD8D21C3D941962315
 Amount of Each Receipt this Period 25.00
 Memo Item

C. McCadd, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1842 Raes Creek Dr
 City Bolingbrook State IL Zip Code 60490-2082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2020
Transaction ID : 4FD1952F26A7E9E62C30
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
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 49 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. McDonald, Gregg S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2810 Powell Dr
 City Bloomington State IL Zip Code 61704-4716
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Claims Mgr - P&C
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 45EC85A8F04DCE9A9257
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Meier, Doug, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2820 Woodland Dr
 City New Castle State IN Zip Code 47362-8715
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 270.00

Date of Receipt 12 / 18 / 2020
Transaction ID : 492F97711D20E18081C8
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Melendez, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7244 W Pacific Ave
 City Lakewood State CO Zip Code 80227-2676
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1575.00

Date of Receipt 12 / 02 / 2020
Transaction ID : 477598F854A91CEC24A7
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 405.00
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 50 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Melendez, Tammy, , ,

Mailing Address 7244 W Pacific Ave

City Lakewood	State CO	Zip Code 80227-2676
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 485CB5F3B0CDEB03B535

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 111 Willits St
Apt 501

City Birmingham	State MI	Zip Code 48009-3332
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 4AF3A682ADA2C857462A

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 111 Willits St
Apt 501

City Birmingham	State MI	Zip Code 48009-3332
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 43F8A0FC0F8AC058C692

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Miller, Justi, , ,

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

Mailing Address 15 Strawberry Rd

City Bloomington	State IL	Zip Code 61704-2833
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2020

Transaction ID : 45D4BFAEFAB8C3C121FF

Amount of Each Receipt this Period
41.66

Memo Item

B. Miller, Justi, , ,

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

Mailing Address 15 Strawberry Rd

City Bloomington	State IL	Zip Code 61704-2833
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2020

Transaction ID : 4E6191C93D8D7AFA95A7

Amount of Each Receipt this Period
41.66

Memo Item

C. Miner, Jane Wright, , ,

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

Mailing Address 119 Pheasant Xing

City Glastonbury	State CT	Zip Code 06033-2857
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2020

Transaction ID : 48FAA701CF30FC3FAC0D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	133.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Monteiro, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Redbridge Ct
 City Setauket State NY Zip Code 11733-1970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2020
Transaction ID : 4DC8BEB0FC9FD020AEFE
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Mormann, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1192 Walter St Ste B
 City Lemont State IL Zip Code 60439-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-23
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Mormann, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1192 Walter St Ste B
 City Lemont State IL Zip Code 60439-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-24
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 53 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Nadelhoffer, Gus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14800 SW 150th Ave
 City Tigard State OR Zip Code 97224-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2020
Transaction ID : 4EE2ACE9B31012589AB8
 Amount of Each Receipt this Period
 41.66
 Memo Item

B. Nash, Robert Ralph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9302 Parkstone Cir
 City Roseville State CA Zip Code 95747-6326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2020
Transaction ID : 4705B5C14B248F794F7B
 Amount of Each Receipt this Period
 600.00
 Memo Item

C. Nazar, Nick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1351 Aberdeen Ave
 City Baton Rouge State LA Zip Code 70808-3710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2020
Transaction ID : 49C396D4E61529F2EADD
 Amount of Each Receipt this Period
 19.22
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	660.88
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 54 OF 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Nelson, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12508 S 83rd Ave

City Palos Park	State IL	Zip Code 60464-2023
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2020

Transaction ID : 410596C315529A8A373E

Amount of Each Receipt this Period
 60.00

Memo Item

B. Nelund, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 W Wellington Ct

City Norton Shores	State MI	Zip Code 49441-4881
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2020

Transaction ID : 47EB81943BAC091757FA

Amount of Each Receipt this Period
 25.00

Memo Item

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

Mailing Address 1341 Highcrest Dr

City Medford	State OR	Zip Code 97504-9351
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2020

Transaction ID : 4851A4841E40A6E099D4

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
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 55 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Nicholson, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1341 Highcrest Dr
 City Medford State OR Zip Code 97504-9351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 26 / 2020**
Transaction ID : 4A2EAA14C3F3672BED3A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Niese, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8210 N Low Gap Rd
 City Unionville State IN Zip Code 47468-9781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 999.84

Date of Receipt **12 / 20 / 2020**
Transaction ID : 4A6BA6B5A1F785256943
 Amount of Each Receipt this Period 83.32
 Memo Item

C. Nusbaum, E J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4308 Teeter Totter Cir
 City Colorado Spgs State CO Zip Code 80917-2937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 23 / 2020**
Transaction ID : 4FBFB539C217677E20D
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 158.32
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Ocampo Rolon, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19330 Middle Branch Dr
 City Macomb State MI Zip Code 48044-6704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 4257A1D9327C0EDFB537
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Palaian, Nick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3325 Salem Ct
 City Rochester Hills State MI Zip Code 48306-3054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 13 / 2020
Transaction ID : 49FDA36E68653B600B40
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Parks, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19065 Nixon Ave
 City West Linn State OR Zip Code 97068-2154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 13 / 2020
Transaction ID : 4AA7B17E58956AAF7C11
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	425.00
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 57 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Passarelli, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15055 W Warren Ave
 City Lakewood State CO Zip Code 80228-6411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 12 / 20 / 2020
Transaction ID : 4286A0E01FAA7B1FC44C
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Pettus, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2206 Old Ivy Way Apt 9
 City Dalton State GA Zip Code 30720-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 12 / 11 / 2020
Transaction ID : 459A887D22F7AB59285F
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Pollock, Heidi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3764 Waterbrook Way
 City Eugene State OR Zip Code 97408-5968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 11 / 28 / 2020
Transaction ID : 43298F14B34CF3D24D24
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
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 58 OF 92
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

A. Pollock, Heidi, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3764 Waterbrook Way

City Eugene	State OR	Zip Code 97408-5968
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2020

Transaction ID : 463F800CCE7813E36FAC

Amount of Each Receipt this Period
100.00

Memo Item

B. Porter, Tom, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10363 Ridgeland Ave

City Chicago Ridge	State IL	Zip Code 60415-1585
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2020

Transaction ID : 2020112011535-18

Amount of Each Receipt this Period
50.00

Memo Item

C. Porter, Tom, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10363 Ridgeland Ave

City Chicago Ridge	State IL	Zip Code 60415-1585
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

Transaction ID : 2020122211295-18

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 59 OF 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Powell, Deron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Saint Andrews Dr
 City Lincoln State IL Zip Code 62656-5342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2020
Transaction ID : 4E1B8239027E1B424430
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Prusakowski, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Volusia Ave
 City Oakwood State OH Zip Code 45409-2344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 13 / 2020
Transaction ID : 4EA890D17252C8BBFE89
 Amount of Each Receipt this Period 62.50
 Memo Item

C. Rader, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Derby Way
 City Bloomington State IL Zip Code 61704-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 21 / 2020
Transaction ID : 41A1AD2C22DE7CCD2D85
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	687.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Ramsey, Russ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Heathrow Ln
 City Rochester State IL Zip Code 62563-8718
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 12 / 05 / 2020
 Transaction ID : 47DB8031F874B9EF1177
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Ratzlaff, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 E Ellendale Ave Ste 1
 City Dallas State OR Zip Code 97338-3133
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 11 / 30 / 2020
 Transaction ID : 2020112011535-81
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Ratzlaff, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 E Ellendale Ave Ste 1
 City Dallas State OR Zip Code 97338-3133
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 12 / 31 / 2020
 Transaction ID : 2020122211295-90
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 150.00
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 61 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ray, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Pebblebrook Ct

City Bloomington	State IL	Zip Code 61705-6300
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Medical Director
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 41F58266D3926EAE0397

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 11 Pebblebrook Ct

City Bloomington	State IL	Zip Code 61705-6300
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Medical Director
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 41BABA1031747FE4C6AD

Amount of Each Receipt this Period
 50.00

Memo Item

C. Reimer, Alana S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 Long Cove Ct

City Bloomington	State IL	Zip Code 61704-2903
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 12 / 15 / 2020
Transaction ID : 4092A5FB8A164BD93372

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 62 OF 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ress, Kathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2403 Kaitlyn Dr

City Bloomington	State IL	Zip Code 61704-3436
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 4DA4A399D62F2D26F190

Amount of Each Receipt this Period
 1500.00

Memo Item

B. Ricketts, Trenton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 E Clifty Dr
Ste 4A

City Madison	State IN	Zip Code 47250-4601
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : 2020112011535-54

Amount of Each Receipt this Period
 25.00

Memo Item

C. Ricketts, Trenton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 E Clifty Dr
Ste 4A

City Madison	State IN	Zip Code 47250-4601
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 2020122211295-61

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
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 63 OF 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Rideout, Greg, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6868 W Jewell Dr

City Lakewood	State CO	Zip Code 80227-2579
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 49B99AC09F4EB3BECDE4

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 6868 W Jewell Dr

City Lakewood	State CO	Zip Code 80227-2579
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 4DBC826038A6EF967C37

Amount of Each Receipt this Period

Memo Item

C. Riley, Katie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5961 Middlefield Rd
Ste 102

City Littleton	State CO	Zip Code 80123-2873
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 2020112011535-1

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 64 OF 92
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. Riley, Katie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5961 Middlefield Rd
Ste 102

City Littleton	State CO	Zip Code 80123-2873
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

Transaction ID : 2020122211295-1

Amount of Each Receipt this Period
25.00

Memo Item

B. Rizzo, Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1803 Dunhill Cir

City Glenview	State IL	Zip Code 60025-7618
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2020

Transaction ID : 0B261BD6-4EBE-4FFB-

Amount of Each Receipt this Period
250.00

Memo Item

C. Rodriguez, Jose Adrian, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 Red Rock Rd

City Normal	State IL	Zip Code 61761-6438
----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Claims Mgr - P&C
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2020

Transaction ID : 72B51643-8403-4433-

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
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 65 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Rowland, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Birchcrest Dr SE
 City Grand Rapids State MI Zip Code 49506-5417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 28 / 2020
Transaction ID : 4433A3A8416BAB75F0CA
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Rowland, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Birchcrest Dr SE
 City Grand Rapids State MI Zip Code 49506-5417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 28 / 2020
Transaction ID : 4DE4BF8A85B90A802FA4
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Rutledge, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 W Iliff Ave
 City Lakewood State CO Zip Code 80228-6441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 01 / 2020
Transaction ID : 45D6A4406FA14D16A0E3
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 66 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Sanchez, Christina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41764 Corte Lara
 City Temecula State CA Zip Code 92592-6314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 01 / 2020
Transaction ID : 473D96BCCBDB038E49D0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Sax, Jordan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Brookline Ct
 City Bloomington State IL Zip Code 61705-8737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Corporate Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 7B707748-84F0-4A22-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Schram, Kathryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48875 Gratiot Ave
 City Chesterfield State MI Zip Code 48051-2616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 30 / 2020
Transaction ID : 2020112011535-69
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Schram, Kathryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48875 Gratiot Ave

City Chesterfield	State MI	Zip Code 48051-2616
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-78

Amount of Each Receipt this Period
 25.00

Memo Item

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

Mailing Address 533 Meadow Wood Dr

City Joliet	State IL	Zip Code 60431-4815
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 12 / 18 / 2020
Transaction ID : 43A4A5FD8AB844AB2B85

Amount of Each Receipt this Period
 500.00

Memo Item

C. Shiflett, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 Byrd St

City Orange	State VA	Zip Code 22960-1631
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 12 / 29 / 2020
Transaction ID : 4B0498DDEE89B9BCCEA1

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
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 68 OF 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Short, Dru, , ,

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

Mailing Address 1320 Simms St
Ste 104

City Lakewood State CO Zip Code 80401-4478

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 30 / 2020**

Transaction ID : 2020112011535-2

Amount of Each Receipt this Period 25.00

Memo Item

B. Short, Dru, , ,

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

Mailing Address 1320 Simms St
Ste 104

City Lakewood State CO Zip Code 80401-4478

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 31 / 2020**

Transaction ID : 2020122211295-2

Amount of Each Receipt this Period 25.00

Memo Item

C. Slater, Sean, , ,

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

Mailing Address 5264 S Haleyville St

City Aurora State CO Zip Code 80016-4273

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 499.92

Date of Receipt **12 / 02 / 2020**

Transaction ID : 4B2091C51F564680539E

Amount of Each Receipt this Period 41.66

Memo Item

SUBTOTAL of Receipts This Page (optional).....	91.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 OF 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Slowikowski, Cora, , ,

Mailing Address 3423 Ridgeway Dr SE

City Turner	State OR	Zip Code 97392-9543
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 43E68AAEDB236F8A387E

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Smith, Dave, , ,

Mailing Address 7217 Sashabaw Rd

City Clarkston	State MI	Zip Code 48348-4741
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FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 202012011535-71

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Smith, Dave, , ,

Mailing Address 7217 Sashabaw Rd

City Clarkston	State MI	Zip Code 48348-4741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : 2020122211295-80

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 70 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Smith, Nic, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2840 Crescent Ave
 Ste 200

City Eugene State OR Zip Code 97408-7347

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-83

Amount of Each Receipt this Period
 25.00

Memo Item

B. Smith, Nic, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2840 Crescent Ave
 Ste 200

City Eugene State OR Zip Code 97408-7347

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-92

Amount of Each Receipt this Period
 25.00

Memo Item

C. Soares De Sa, Gustavo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 295 3rd St
 Apt 5

City Lake Oswego State OR Zip Code 97034-3057

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

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2020
Transaction ID : 4179B64B87BEB1FC36CF

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 71 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Spachman, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 E College Ave
 Ste A
 City Bloomington State IL Zip Code 61704-2484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-28
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Spachman, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 E College Ave
 Ste A
 City Bloomington State IL Zip Code 61704-2484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-30
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Spoon, Rachael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7460 Ruth Dr
 City Klamath Falls State OR Zip Code 97603-9023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 4022A668202B2950EB49
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 72 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Spoon, Rachael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7460 Ruth Dr
 City Klamath Falls State OR Zip Code 97603-9023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 4ACFBB5016FB1F025173
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Stephens, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3163 N Silver Ridge Dr
 City Oregon State IL Zip Code 61061-8813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt **12 / 10 / 2020**
Transaction ID : 4D75B4274849209C7384
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt **11 / 27 / 2020**
Transaction ID : 4E43A6686420E253F3DE
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
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 73 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Stirm, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 Ash Dr
 City Rogue River State OR Zip Code 97537-9624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 27 / 2020
Transaction ID : 4217BB9F6A97A6E13A6A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Stolper, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 276 S Arlington Ave
 City Elmhurst State IL Zip Code 60126-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 08 / 2020
Transaction ID : 4EF88071702F13191823
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Stull, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 E Flint St
 City Chandler State AZ Zip Code 85225-5473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Grassroots Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 749.88

Date of Receipt 12 / 15 / 2020
Transaction ID : 4EC79D8968179C28354E
 Amount of Each Receipt this Period 83.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	158.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Swenby, Kit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12354 W Alameda Pkwy
 Ste 150

City Lakewood State CO Zip Code 80228-2860

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 30 / 2020
Transaction ID : 2020112011535-7

Amount of Each Receipt this Period
 25.00

Memo Item

B. Swenby, Kit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12354 W Alameda Pkwy
 Ste 150

City Lakewood State CO Zip Code 80228-2860

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : 2020122211295-7

Amount of Each Receipt this Period
 25.00

Memo Item

C. Tarter, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1474 Newton Ave

City Batavia State IL Zip Code 60510-3582

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

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 12 / 04 / 2020
Transaction ID : 4854ACEDA8C3323AEFB9

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 75 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Taulbee, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2107 Woodbine Rd
 City Bloomington State IL Zip Code 61704-2813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.84

Date of Receipt 12 / 23 / 2020
Transaction ID : 4EDDB591718743DA2DC2
 Amount of Each Receipt this Period 83.32
 Memo Item

B. Terry, Shyama N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13342 E Cannon Dr
 City Scottsdale State AZ Zip Code 85259-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Ovp - Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 38D8779C-FFAA-4079-
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Terry, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 Southwind Ln
 City McKinney State TX Zip Code 75070-4871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Pa & Chiefdiversityofficer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2499.84

Date of Receipt 12 / 21 / 2020
Transaction ID : 4D4E9CC9D4DEBB89E7B5
 Amount of Each Receipt this Period 208.32
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Thein, Ron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9406 Crossbow Dr
 City Bloomington State IL Zip Code 61705-8003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Financial Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 18 / 2020**
Transaction ID : 41A7B660695B72483106
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Thorns, Monte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 Dale Greene PI
 City Virginia Bch State VA Zip Code 23456-4473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.96

Date of Receipt **11 / 29 / 2020**
Transaction ID : 4490A70E565EBC4F1605
 Amount of Each Receipt this Period 83.32
 Memo Item

C. Thorns, Monte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 Dale Greene PI
 City Virginia Bch State VA Zip Code 23456-4473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.96

Date of Receipt **12 / 29 / 2020**
Transaction ID : 442495CCC826F6F2A9A8
 Amount of Each Receipt this Period 83.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	291.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Thorp, Bill, , ,

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

Mailing Address 1099 SE Oriole St

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 608.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2020

Transaction ID : 4BEB9A41E16D507454C9

Amount of Each Receipt this Period
 50.00

Memo Item

B. Tice, Dan, , ,

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

Mailing Address 1020 104th St Ste 124

City Naperville	State IL	Zip Code 60564-5116
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : 2020112011535-48

Amount of Each Receipt this Period
 50.00

Memo Item

C. Tice, Dan, , ,

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

Mailing Address 1020 104th St Ste 124

City Naperville	State IL	Zip Code 60564-5116
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020

Transaction ID : 2020122211295-53

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 78 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tilkin, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 Stoney Point Farm Rd
 City Cumming State GA Zip Code 30041-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.72

Date of Receipt **11 / 29 / 2020**
Transaction ID : 4A6CBF9E34AEDB814ABC
 Amount of Each Receipt this Period 23.06
 Memo Item

B. Tilkin, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 Stoney Point Farm Rd
 City Cumming State GA Zip Code 30041-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.72

Date of Receipt **12 / 29 / 2020**
Transaction ID : 4DCBB71297398ACFA772
 Amount of Each Receipt this Period 23.06
 Memo Item

C. Toole, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3350 N Maple St
 City Canby State OR Zip Code 97013-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 03 / 2020**
Transaction ID : 4CCF8B865E8944AB62C5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	71.12
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 79 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Topolnicki, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3179 Springbriar Dr
 City Castle Rock State CO Zip Code 80109-7999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2020
Transaction ID : 4CB2965BC28A09412F18
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Topolnicki, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3179 Springbriar Dr
 City Castle Rock State CO Zip Code 80109-7999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2020
Transaction ID : 4FCCAB9AA634D13B1041
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Tran, Mai, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3143 S 276th Ct
 City Auburn State WA Zip Code 98001-5014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Claims Mgr - P&C
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2020
Transaction ID : 49509A5C74BEC085CFB6
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 81 OF 92 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ung, Kilong, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4000 SE 82nd Ave
 Ste 1400

City Portland State OR Zip Code 97266-2949

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **12 / 31 / 2020**

Transaction ID : 2020122211295-95

Amount of Each Receipt this Period **25.00**

Memo Item

B. Waddell, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 Southpointe Ct
 Ste 205

City Colorado Spgs State CO Zip Code 80906-3861

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 30 / 2020**

Transaction ID : 2020112011535-8

Amount of Each Receipt this Period **25.00**

Memo Item

C. Waddell, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 Southpointe Ct
 Ste 205

City Colorado Spgs State CO Zip Code 80906-3861

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

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

Receipt For: Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **12 / 31 / 2020**

Transaction ID : 2020122211295-8

Amount of Each Receipt this Period **25.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 82 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Wain, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8310 N Custer Rd

City Monroe	State MI	Zip Code 48162-9622
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		07		2020

Transaction ID : 911328EA-4B06-4014-

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 22522 Bowens Wharf PI

City Ashburn	State VA	Zip Code 20148-6634
-----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Area Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2676.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2020

Transaction ID : 4886BA455C776C0F7EC6

Amount of Each Receipt this Period
208.32

Memo Item

C. Wang, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22522 Bowens Wharf PI

City Ashburn	State VA	Zip Code 20148-6634
-----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Area Vice President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2676.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		26		2020

Transaction ID : 42289E409F40831F0F7C

Amount of Each Receipt this Period
208.32

Memo Item

SUBTOTAL of Receipts This Page (optional).....	716.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Waterman, Analene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8749 Darley Rd SE
 City Aumsville State OR Zip Code 97325-9751
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 12 / 10 / 2020
Transaction ID : 4D9790C6C4E74EB309A5
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Watkins, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Burgundy Ct
 City Bloomington State IL Zip Code 61704-8372
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 16 / 2020
Transaction ID : 4706829BC70388834439
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Watts, Allyson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6225 Habersham Way
 City McKinney State TX Zip Code 75071-1421
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2020
Transaction ID : 0EAFCD59-2AC6-40C7-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 1275.00
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 84 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Webber, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6610 Lakeview Ln
 City Monee State IL Zip Code 60449-8103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2020
Transaction ID : 412585A967492A4134C8
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Webster, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16112 Parkside Dr
 City Parker State CO Zip Code 80134-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2020
Transaction ID : 474481B9CDD49E2A43B9
 Amount of Each Receipt this Period
 33.32
 Memo Item

C. Westerman, Tim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 Peaceful Rd
 City Chesapeake State VA Zip Code 23322-2248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2020
Transaction ID : 42049D9D1871361C9601
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	533.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Wielt, Tony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12727 Franklin Cemetary Rd
 City Whittington State IL Zip Code 62897-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 11 / 27 / 2020
Transaction ID : 4BDDBD8659669384D997
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Wielt, Tony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12727 Franklin Cemetary Rd
 City Whittington State IL Zip Code 62897-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 12 / 27 / 2020
Transaction ID : 4BA69AFD21B35A4262B2
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Wilkerson, Emory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Pointer Ridge Trl
 City Fayetteville State GA Zip Code 30214-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt
 11 / 27 / 2020
Transaction ID : 425DABBE6122357D7357
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
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 86 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Wilkerson, Emory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Pointer Ridge Trl
 City Fayetteville State GA Zip Code 30214-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt **12 / 27 / 2020**
Transaction ID : 4DA0889E7F14350535DD
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Willey, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 Cermak Rd
 City Berwyn State IL Zip Code 60402-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-45
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Willey, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 Cermak Rd
 City Berwyn State IL Zip Code 60402-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-50
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
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 87 OF 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Williams, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 W Lake St
 City Chicago State IL Zip Code 60644-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1458.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2020
Transaction ID : 2020112011535-21
 Amount of Each Receipt this Period
 208.33
 Memo Item

B. Williams, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 W Lake St
 City Chicago State IL Zip Code 60644-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1458.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : 2020122211295-22
 Amount of Each Receipt this Period
 208.33
 Memo Item

C. Williams, Russel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 Winkel Way
 City West Linn State OR Zip Code 97068-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2020
Transaction ID : 4498A1564054364A944C
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	441.66
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 92
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Wilson, Clint, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10870 Harbor Bay Dr
 City Fishers State IN Zip Code 46040-9012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2020
Transaction ID : 472696DCC444C76EEB5F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Wimmer, Russ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1082
 City Medford State OR Zip Code 97501-0079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2020
Transaction ID : 46738ECEDA3F1221E282
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Wold, Rory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 Martin Dr
 City Medford State OR Zip Code 97501-8137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2020
Transaction ID : 45C5B9C640B1ADB8953E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 89 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Wold, Rory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 Martin Dr
 City Medford State OR Zip Code 97501-8137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **12 / 29 / 2020**
Transaction ID : 4FF282B2FC81D6EAD25A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Wright, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Essington Rd Ste A
 City Joliet State IL Zip Code 60435-8416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.50

Date of Receipt **11 / 30 / 2020**
Transaction ID : 2020112011535-20
 Amount of Each Receipt this Period 62.50
 Memo Item

C. Wright, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Essington Rd Ste A
 City Joliet State IL Zip Code 60435-8416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.50

Date of Receipt **12 / 31 / 2020**
Transaction ID : 2020122211295-21
 Amount of Each Receipt this Period 62.50
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Yowell, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24362 Ron Smith Memorial Hwy
 City Hudson State IL Zip Code 61748-7553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpcorp governance, Secr& Counsel
 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 / 30 / 2020
Transaction ID : 0082CAD7-9797-40F1-
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Zech, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5288 Donohoe Ave
 City Eugene State OR Zip Code 97402-1472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2020
Transaction ID : 458FBE773A38222439BC
 Amount of Each Receipt this Period
 41.66
 Memo Item

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

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

SUBTOTAL of Receipts This Page (optional).....	2541.66
TOTAL This Period (last page this line number only).....	31981.26

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Filemon Vela For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 12 / 29 / 2020

Mailing Address: 1150 N Loop 1604 W Ste 108

City: San Antonio State: TX Zip Code: 78248

Purpose of Disbursement: 2020 General
Category/Type: 011

Candidate Name: Vela, Filemon, Bartolome, , Jr.

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

State: TX District: 34

FEC Identification Number: C00513531
Transaction ID: 3055281AF8
Amount of Each Disbursement this Period: - 250.00

Memo Item

B. Georgians For Kelly Loeffler

Full Name (Last, First, Middle Initial)
Date of Disbursement: 12 / 08 / 2020

Mailing Address: PO Box 20036

City: Atlanta State: GA Zip Code: 30325

Purpose of Disbursement: 2020 Run-Off
Category/Type: 011

Candidate Name: Loeffler, Kelly, , ,

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

State: GA District:

FEC Identification Number: C00729608
Transaction ID: 5DE2BDC8EC
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Yarmuth For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 12 / 10 / 2020

Mailing Address: 1815 Brownsboro Rd

City: Louisville State: KY Zip Code: 40202

Purpose of Disbursement: 2020 General
Category/Type: 011

Candidate Name: Yarmuth, John, A., ,

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

State: KY District: 03

FEC Identification Number: C00419630
Transaction ID: 1559CACBCI
Amount of Each Disbursement this Period: - 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4250.00
TOTAL This Period (last page this line number only).....▶	4250.00

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

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

A. COMMITTEE TO ELECT YOUSEF RABHI

Full Name (Last, First, Middle Initial)
Mailing Address 1255 KENSINGTON DR

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement 2020 General
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 22 / 2020

FEC Identification Number: C
Transaction ID : 00896E9D18F
Amount of Each Disbursement this Period: - 400.00

Memo Item

B. PATRICK FOR COLORADO

Full Name (Last, First, Middle Initial)
Mailing Address 4128 ASTRION CT

City CASTLE ROCK State CO Zip Code 80104

Purpose of Disbursement 2020 Primary
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 22 / 2020

FEC Identification Number: C
Transaction ID : 45250B77FDE
Amount of Each Disbursement this Period: - 200.00

Memo Item

C. PATRICK FOR COLORADO

Full Name (Last, First, Middle Initial)
Mailing Address 4128 ASTRION CT

City CASTLE ROCK State CO Zip Code 80104

Purpose of Disbursement 2020 General
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 22 / 2020

FEC Identification Number: C
Transaction ID : 8C1138F136I
Amount of Each Disbursement this Period: - 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	- 800.00
TOTAL This Period (last page this line number only).....▶	- 800.00