

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

ADDRESS (number and street) 1601 Exposition Blvd; PC1A
 Check if different than previously reported. (ACC)
Sacramento CA 95815

2. **FEC IDENTIFICATION NUMBER** C00406215
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2009 through 08 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Cecil Autry
Signature of Treasurer Electronically Filed by Cecil Autry Date 09 09 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		33349.07
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	33139.05									
(c) Total Receipts (from Line 19)	939.88	8979.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34078.93	42328.93								
7. Total Disbursements (from Line 31)	0.00	8250.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34078.93	34078.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	562.88	2838.26
(ii) Unitemized	377.00	6141.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	939.88	8979.86
(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)	939.88	8979.86
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 Transfer (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))	939.88	8979.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	939.88	8979.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	8250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	0.00	8250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	8250.00

DETAILED SUMMARY PAGE
of Disbursements

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	939.88	8979.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	939.88	8979.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 14
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Cecil Autry

Mailing Address 333 Atessa Court

City State Zip Code
Roseville CA 95747-8381

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

Name of Employer Occupation
Nationwide Enterprise Lead Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: EMP2009081410101

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Cecil Autry

Mailing Address 333 Atessa Court

City State Zip Code
Roseville CA 95747-8381

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

Name of Employer Occupation
Nationwide Enterprise Lead Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: EMP2009082810102

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Robert A. Biló

Mailing Address 4706 Village Green Drive

City State Zip Code
El Dorado Hills CA 95762-7674

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

Name of Employer Occupation
Nationwide Regional Vice President - NRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: EMP2009081410104

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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 8 / 14

(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Robert A. Bilo

Mailing Address 4706 Village Green Drive

City State Zip Code
El Dorado Hills CA 95762-7674

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Nationwide Regional Vice President - NRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 28 / 2009

Transaction ID: EMP2009082810105

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Linda L. Coleman

Mailing Address 9745 Summer Glen Way

City State Zip Code
Elk Grove CA 95757-8322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Nationwide Enterprise Specialist, Process Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 14 / 2009

Transaction ID: EMP2009081410087

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Linda L. Coleman

Mailing Address 9745 Summer Glen Way

City State Zip Code
Elk Grove CA 95757-8322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Nationwide Enterprise Specialist, Process Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 28 / 2009

Transaction ID: EMP2009082810088

Amount of Each Receipt this Period 25.00

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 9 / 14
(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Randy M. Eggers

Mailing Address 1929 Eagle Glen Drive

City State Zip Code
Roseville CA 95661-4025

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

Name of Employer Nationwide Enterprise Occupation AVP, PCRO Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: EMP2009081410080

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Randy M. Eggers

Mailing Address 1929 Eagle Glen Drive

City State Zip Code
Roseville CA 95661-4025

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

Name of Employer Nationwide Enterprise Occupation AVP, PCRO Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: EMP2009082810081

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
John D. Fischl

Mailing Address 9341 Moondancer Circle

City State Zip Code
Roseville CA 95747-7114

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

Name of Employer Nationwide Enterprise Occupation AVP, IA Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: EMP2009081410088

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **45.00**

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 10 / 14
(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
John D. Fischl

Mailing Address 9341 Moondancer Circle

City State Zip Code
Roseville CA 95747-7114

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

Name of Employer Occupation
Nationwide Enterprise AVP, IA Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: EMP2009082810089

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
David A. Koester

Mailing Address 21 Emerald Glen

City State Zip Code
Laguna Niguel CA 92677-9371

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

Name of Employer Occupation
Nationwide AVP, Trial Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: EMP2009081410076

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
David A. Koester

Mailing Address 21 Emerald Glen

City State Zip Code
Laguna Niguel CA 92677-9371

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

Name of Employer Occupation
Nationwide AVP, Trial Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: EMP2009082810077

Amount of Each Receipt this Period
25.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 14
(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Jaynealyce Mitchell

Mailing Address 515 Causeway Drive

City State Zip Code
Sacramento CA 95831-5776

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

Name of Employer Nationwide Occupation IA National Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: EMP2009081410090

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Jaynealyce Mitchell

Mailing Address 515 Causeway Drive

City State Zip Code
Sacramento CA 95831-5776

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

Name of Employer Nationwide Occupation IA National Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: EMP2009082810091

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Robert Patrick O'Hollearn

Mailing Address 1005 Hutley Way

City State Zip Code
Granite Bay CA 95746-7160

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

Name of Employer Nationwide Enterprise Occupation RVP, Pacific Coast

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: EMP2009081410084

Amount of Each Receipt this Period
40.00

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 12 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A. Full Name (Last, First, Middle Initial)
Robert Patrick O'Hollearn
Mailing Address 1005 Hutley Way
City State Zip Code
Granite Bay CA 95746-7160
FEC ID number of contributing federal political committee. **C**
Name of Employer Nationwide Enterprise Occupation RVP, Pacific Coast
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00
Date of Receipt MM / DD / YYYY
08 / 28 / 2009
Transaction ID: EMP2009082810085
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Margie Piercy
Mailing Address 1778 Herbert Court
City State Zip Code
Yuba City CA 95993-1654
FEC ID number of contributing federal political committee. **C**
Name of Employer Nationwide Enterprise Occupation Staff Operations Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 428.86
Date of Receipt MM / DD / YYYY
08 / 14 / 2009
Transaction ID: EMP2009081410000
Amount of Each Receipt this Period 26.44

C. Full Name (Last, First, Middle Initial)
Margie Piercy
Mailing Address 1778 Herbert Court
City State Zip Code
Yuba City CA 95993-1654
FEC ID number of contributing federal political committee. **C**
Name of Employer Nationwide Enterprise Occupation Staff Operations Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 428.86
Date of Receipt MM / DD / YYYY
08 / 28 / 2009
Transaction ID: EMP2009082810000
Amount of Each Receipt this Period 26.44

SUBTOTAL of Receipts This Page (optional) ► 92.88
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 13 / 14
(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Melody Rivas

Mailing Address 4809 Careyback Avenue

City Elk Grove State CA Zip Code 95758-5111

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

Name of Employer Nationwide Enterprise Occupation Claims Manager - Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: EMP2009081410094

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Melody Rivas

Mailing Address 4809 Careyback Avenue

City Elk Grove State CA Zip Code 95758-5111

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

Name of Employer Nationwide Enterprise Occupation Claims Manager - Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: EMP2009082810095

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Todd Squiers

Mailing Address 70 Corte Patencio

City Greenbrae State CA Zip Code 94904-1116

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

Name of Employer Nationwide Occupation NBH Bus Dev Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: EMP2009081410092

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **55.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 14
(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)
Nationwide Mutual Insurance Company and Allied Group Inc. PAC of California

A.

Full Name (Last, First, Middle Initial)
Todd Squiers

Mailing Address 70 Corte Patencio

City State Zip Code
Greenbrae CA 94904-1116

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

Name of Employer Nationwide Occupation NBH Bus Dev Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: EMP2009082810093

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Brett D. Tupps

Mailing Address 437 Aria Drive

City State Zip Code
El Dorado Hills CA 95762-3963

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

Name of Employer Nationwide Occupation RVP, Pacific West

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: EMP2009081410074

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Brett D. Tupps

Mailing Address 437 Aria Drive

City State Zip Code
El Dorado Hills CA 95762-3963

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

Name of Employer Nationwide Occupation RVP, Pacific West

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: EMP2009082810075

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ► 562.88