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Image# 201907319161247654

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other	r Than An Au	thorized	Commit	tee		Office Use Only	y
NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼		mple: If typ r the lines.	ing, type	12FE4M	5	
MOTORISTS MUTU	AL INSUF	RANCE CON	//PANY	CIVIC F	UND			I
ADDRESS (number and street)	471 E B	ROAD ST						
Check if different than previously reported. (ACC)	COLUM	IBUS				OH	43215	 J-L
2. FEC IDENTIFICATION I	NUMBER V	С	ITY ▲			STATE ▲	ZIP (CODE A
C C00336834			IS THIS REPORT	×	NEW (N) OR	AN (A)	MENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:		port Ma	ar 20 (M3)		May 20 (M5) Jun 20 (M6)	Sep	20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	(Q2)	12-Day PRE-Election Report for the:	or 20 (M4)	Primary (12		General Special (Runoff (12R)
January 31 Year-End Report		Elect	ion on	M = M		Y Y Y Y	in th	
July 31 Mid-Year Report (Non-elec Year Only) (MY)		30-Day POST-Election Report for the:		General (30	0G)	Runoff (3	30R)	Special (30S)
Termination Repo	ort		ion on	M = M	D = D /	Y . Y . Y . Y	in th State	
5. Covering Period	01 0		Y	through	06_	30	2019	
I certify that I have examined Type or Print Name of Treasu	Moore,	and to the best of Marchelle, , ,	of my knov	wledge and	belief it is tru	ue, correct and	complete.	
Signature of Treasurer	oore, Marchelle	, , ,		[Electronical	lly Filed] [Date 07	30	2019
NOTE: Submission of false, error	oneous, or inc	complete informati	on may su	bject the pe	rson signing t	nis Report to th	ne penalties of	52 U.S.C. § 30109
Office Use							FEC FO	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND

01 01 2019 06 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 42533.15 January 1, 2019 (b) Cash on Hand at 42533.15 Beginning of Reporting Period..... 16666.25 16666.25 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 59199.40 59199.40 6(a) and 6(c) for Column B)..... 15240.10 15240.10 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 43959.30 43959.30 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND

Re	eport Covering the Period: From:		06 30 / 2019				
	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 Committee						
	Than Political Committees (i) Itemized (use Schedule A)	7870.00	7870.00				
	(ii) Unitemized	8796.25	8796.25				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	16666.25	16666.25				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)	0.00	0.00				
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	16666.25	16666.25				
12.	Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00				
	(Dividends, Interest, etc.)	0.00	0.00				
	(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))▶	16666.25	16666.25				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	16666.25	16666.25				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period					
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar Year-to-Date				
Activity (from Schedule H4)	0.00	0.00				
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	190.10	190.10				
(b) Other Federal Operating Expenditures	0.00	0.00				
(c) Total Operating Expenditures						
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	190.10	190.10				
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00				
. Independent Expenditures (use Schedule E)	0.00	0.00				
. Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	4 1 4 1 4 1 4				
(use Schedule F)	0.00	0.00				
. Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
(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				
. Other Disbursements (Including	4 4 4	4 4				
Non-Federal Donations)	15050.00	15050.00				
 Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6) 	1(20))					
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00				
Entirely With Federal Funds	0.00	0.00				
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00				
. Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15240.10	15240.10				
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	15050.00	15050.00				

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	16666.25	16666.25
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16666.25	16666.25
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER:					PAGE		6	OF	53	
(0	(check only one)									
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		13		14		15		16	;	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ini Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop	tial) or Full Organization Name	Date of Receipt
City	State Zip Code OH 43016	03 22 2019 Transaction ID : SA11AI.28890
Dublin FEC ID number of contributing federal political committee.	OH 43016	Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) President MLIC Aggregate Year-to-Date ▼ 240.00	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Ini Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C Occupation (for Individual) President MLIC Aggregate Year-to-Date 280,000	Date of Receipt M
Full Name of Individual (Last, First, Middle Ini Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify)	State Zip Code A3016 C Occupation (for Individual) President MLIC Aggregate Year-to-Date 320.00	Date of Receipt M 04
SUBTOTAL of Receipts This Page (optional)	>	120.00
TOTAL This Period (last page this line number	only)	4 4

FOR LINE NUMBER:					PAGE		7	OF	53	
(check only one)										
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	Statements may not be sold or used by any pe he name and address of any political committee					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle I Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify)	State Zip Code OH 43016 C ID number of contributing eral political committee. The of Employer (for Individual) president MLIC Seipt For: Primary General Other (specify) ▼ State Zip Code OH 43016 C ID number of contributing eral political committee. Aggregate Year-to-Date ▼ 360.00					
Full Name of Individual (Last, First, Middle I Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary Other (specify) Full Name of Individual (Last, First, Middle I	State Zip Code OH 43016 C Occupation (for Individual) President MLIC Aggregate Year-to-Date 400,00	Date of Receipt M M M / 2019 Transaction ID: SA11Al.29110 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction				
City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary Other (specify)	State Zip Code 43016 C Occupation (for Individual) President MLIC Aggregate Year-to-Date 440.00	Date of Receipt M M M / 31 2019 Transaction ID: SA11Al.29111 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction				
SUBTOTAL of Receipts This Page (optional)	·····	120.00				
TOTAL This Period (last page this line number	er only)	7 7 7				

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ini Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop	tial) or Full Organization Name	Date of Receipt 06 14 2019
City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify) Technology Technolog	State OH Zip Code 43016 C Occupation (for Individual) President MLIC Aggregate Year-to-Date ▼ 480.00	Transaction ID : SA11AI.29154 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Ini Agan, Michael, J., , Mailing Address 5658 Tynecastle Loop City Dublin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Life Insurance Compa Receipt For: Primary General Other (specify)	State Zip Code 43016 C	Date of Receipt M M M / 28 2019 Transaction ID : SA11Al.29197 Amount of Each Receipt this Period 40.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Ini Ashcraft, David, , , Mailing Address 1323 Ada Lane City Naperville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	State Zip Code IL Cocupation (for Individual) Occupation (for Individual) VP Aggregate Year-to-Date 225.00	Date of Receipt M M M / D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	105.00
TOTAL This Period (last page this line number	only)	

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	Statements may not be sold or used by any pelling name and address of any political committee						
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND						
Full Name of Individual (Last, First, Middle Ir Ashcraft, David, , ,	nitial) or Full Organization Name	Date of Receipt					
Mailing Address 1323 Ada Lane	05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City							
Naperville	Naperville IL 60540						
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Motorists Insurance	VP	Payroll Deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	250.00						
E 11.11	W. D. E ii G						
Full Name of Individual (Last, First, Middle Ir Ashcraft, David, , ,	nitial) or Full Organization Name	Date of Receipt					
Mailing Address 1323 Ada Lane	alling Address 1323 Ada Lane						
City	State Zip Code	05 31 2019 Transaction ID : SA11Al.29112					
Naperville	IL 60540	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) VP	Memo Item Payroll Deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00						
Full Name of Individual (Last, First, Middle Ir Ashcraft, David, , ,	nitial) or Full Organization Name	Date of Receipt					
Mailing Address 1323 Ada Lane		06 14 2019					
City	State Zip Code	Transaction ID : SA11AI.29155					
Naperville	IL 60540	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer (for Individual)	Name of Employer (for Individual) Motorists Insurance Occupation (for Individual) VP						
Receipt For:	eceipt For: Aggregate Year-to-Date ▼						
Primary General Other (specify)	300.00						
SUBTOTAL of Receipts This Page (optional)		75.00					
TOTAL This Period (last page this line number	r only)						

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Ashcraft, David, , , Mailing Address 1323 Ada Lane	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	06 28 2019 Transaction ID : SA11AI.29198
Naperville	IL 60540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance	VP	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name of Individual (Last, First, Middle Ir Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	nitial) or Full Organization Name	Date of Receipt
		03 08 2019
City	State Zip Code	Transaction ID : SA11AI.28866
Dublin	OH 43016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) EVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Ir Benintendi, Jeff, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop		03 22 2019
City Dublin	State Zip Code OH 43016	Transaction ID : SA11AI.28893 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) EVP	Memo Item Payroll Deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)		
SUBTOTAL of Receipts This Page (optional)	125.00	
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COMF	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Initial) or Full Organi	zation Name	Date of Receipt
City	State	Zip Code	04 05 2019
Dublin	OH	43016	Transaction ID : SA11AI.28938 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance	EVP	on (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	-to-Date ▼ 350.00		
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Date of Receipt		
City	Stata	Zin Code	04 19 2019
City Dublin	State 2	Zip Code 43016	Transaction ID: SA11Al.28982 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) Motorists Insurance	Occupation EVP	on (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle Benintendi, Jeff, , ,	Initial) or Full Organi	zation Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop City	State	Zip Code	05 03 2019
Dublin	OH	43016	Transaction ID : SA11AI.29026 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance	on (for Individual)	Memo Item Payroll Deduction	
Receipt For: Primary General Other (specify)	-to-Date ▼ 450.00		
SUBTOTAL of Receipts This Page (optional).			150.00
TOTAL This Period (last page this line number	er only)		

					PAGE	. 1	12	OF		53	
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		used by any person for the purpose of soliciting contributions litical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CI	VIC FUND
Full Name of Individual (Last, First, Middle I Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	05 17 2019
Dublin	OH 43016	Transaction ID : SA11AI.29107 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Indivi	dual) Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	500.00	
Full Name of Individual (Last, First, Middle I Benintendi, Jeff, , , Mailing Address 5658 Tynecastle Loop	Date of Receipt	
City	05 31 2019	
Dublin	State Zip Code 43016	Transaction ID : SA11AI.29114 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Indivi	idual) Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	550.00
Full Name of Individual (Last, First, Middle I Benintendi, Jeff, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop	State 7:n Cod-	06 14 2019
City Dublin	State Zip Code 43016	Transaction ID : SA11AI.29157 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	dual) Memo Item Payroll Deduction	
Receipt For: Primary General Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)	1	150.00
TOTAL This Period (last page this line number	er only)	

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(check only one)										
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		13		14		15		16		17

	statements may not be sold or used by any per ne name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Benintendi, Jeff, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5658 Tynecastle Loop		06 28 2019
City	State Zip Code	Transaction ID : SA11AI.29200
Dublin	OH 43016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance	EVP	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	650.00	
Full Name of Individual (Last, First, Middle Ir Campbell, Grady, , Mr.,	Date of Receipt	
Mailing Address 5760 Whispering Trail	05 03 2019	
City	State Zip Code	Transaction ID : SA11AI.29031
Galena	OH 43021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) Sr. VP Marketing Services & PL	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name of Individual (Last, First, Middle Ir Campbell, Grady, , Mr.,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5760 Whispering Trail		05 17 2019
City	State Zip Code	Transaction ID : SA11AI.29102
Galena	OH 43021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item Payroll Deduction
Motorists Mutual Ins. Co. Receipt For:	Sr. VP Marketing Services & PL	- ayıon Deduction
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number	r only)	

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(che	ck only	or	ne)						
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may he name and add	not be sold or used by any peress of any political committee	erson for the purpose of soliciting contributions eto solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE CON	MPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Campbell, Grady, , Mr.,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 5760 Whispering Trail			05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.29119
Galena	ОН	43021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Motorists Mutual Ins. Co.	Sr. VP	Marketing Services & PL	Payroll Deduction
Receipt For:	ear-to-Date ▼		
Primary General Other (specify) ▼			
Full Name of Individual (Last, First, Middle I Campbell, Grady, , Mr.,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 5760 Whispering Trail			06 14 2019
City	State	Zip Code	Transaction ID : SA11AI.29162
Galena	OH	43021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) Motorists Mutual Ins. Co.		ation (for Individual) Marketing Services & PL	Memo Item Payroll Deduction
Receipt For:	Aggregate Ye	ear-to-Date ▼	
Primary General Other (specify) ▼	4	300.00	
Full Name of Individual (Last, First, Middle I	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 5760 Whispering Trail			06 28 2019
City Galena	State OH	Zip Code 43021	Transaction ID : SA11AI.29205 Amount of Each Receipt this Period
FEC ID number of contributing		· · · · · · ·	
federal political committee.	C		25.00
Name of Employer (for Individual)	ation (for Individual)	Memo Item	
Motorists Mutual Ins. Co. Receipt For:	Marketing Services & PL	Payroll Deduction	
Primary General	Aggregate Ye	ear-to-Date ▼	
Other (specify)	325.00		
SUBTOTAL of Receipts This Page (optional)		·····	75.00
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Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:						PAGE	 15	OF	53
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fallen, Hope,,, Date of Receipt Mailing Address 2642 Blue Lick Rd. 2019 03 City Zip Code State Transaction ID: SA11AI.29034 WV 25213 Winfield Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 05 17 2019 City State Zip Code Transaction ID: SA11AI.29099 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 2019 City Zip Code State Transaction ID: SA11AI.29122 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group AVP Receipt For: Aggregate Year-to-Date ▼ Primary General

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fallen, Hope,,, Date of Receipt Mailing Address 2642 Blue Lick Rd. 2019 City Zip Code State Transaction ID: SA11AI.29165 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Fallen, Hope, , , Date of Receipt Mailing Address 2642 Blue Lick Rd. 06 2019 City State Zip Code Transaction ID: SA11AI.29208 WV Winfield 25213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction **AVP** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gilmore, Amy, , , Date of Receipt Mailing Address 3500 Leap Rd. 03 2019 City State Zip Code Transaction ID: SA11AI.29039 OH Hilliard 43026 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

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Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COM	IPANY CIVIC FUNE)
Full Name of Individual (Last, First, Middle Gilmore, Amy, , ,	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 3500 Leap Rd.			05 17 2019
City	State OH	Zip Code	Transaction ID : SA11AI.29094
Hilliard EEC ID number of contributing		43026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa VP	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Gilmore, Amy, , , Mailing Address 3500 Leap Rd.	Initial) or Full Orga	nization Name	Date of Receipt
			05 31 2019
City Hilliard	State	Zip Code 43026	Transaction ID : SA11AI.29127
FEC ID number of contributing federal political committee.	С	43020	Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa VP	ation (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 275.00	
Full Name of Individual (Last, First, Middle C. Gilmore, Amy, , ,	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 3500 Leap Rd.			06 14 2019
City Hilliard	State OH	Zip Code 43026	Transaction ID : SA11AI.29170 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa VP	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional).			75.00
TOTAL This Period (last page this line number	er only)		

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gilmore, Amy, , , Date of Receipt Mailing Address 3500 Leap Rd. 2019 City Zip Code State Transaction ID: SA11AI.29213 OH Hilliard 43026 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Group Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Griffin, Archie, , , Date of Receipt Mailing Address 6845 Temperance Point Place 2019 City State Zip Code Transaction ID: SA11AI.29270 Westerville OH 43082 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Griffin, Archie, , , Date of Receipt Mailing Address 6845 Temperance Point Place 30 2019 City Zip Code State Transaction ID: SA11AI.29278 OH Westerville 43082 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Co. Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)			,		,	_	525	5.00	_	
TOTAL This Period (last page this line number only)		_	-		7	_		_	_	
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	s and Statements may not be sold or used by any pers sing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL IN	SURANCE COMPANY CIVIC FUND	
A. Hennen, Kirk, , , Mailing Address 2860 Wynridge Drive City Grove City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify) Other	State Zip Code OH 43123 C	Date of Receipt M
Address 2860 Wynridge Drive City Grove City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify)	State Zip Code OH 43123 C Occupation (for Individual) AVP, Sales - West Zone Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, M. Hennen, Kirk, , , Mailing Address 2860 Wynridge Drive City Grove City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Insurance Co Receipt For: Primary General Other (specify)	State Zip Code OH 43123 C Occupation (for Individual) AVP, Sales - West Zone Aggregate Year-to-Date 260.00	Date of Receipt M M M / D D / 28 2019 Transaction ID : SA11Al.29218 Amount of Each Receipt this Period 20.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (option	onal)	60.00
TOTAL This Period (last page this line r	number only)	

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit	<u> </u>	Date of Receipt
City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify) ▼	State Zip Code 43215 C Occupation (for Individual) EVP Aggregate Year-to-Date ▼	Transaction ID : SA11AI.28852 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit State City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	, ,	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle In Howat, James, Christopher, , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	, ,	Date of Receipt 04 05 2019 Transaction ID: SA11AI.28957 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the		tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUN	D
Full Name of Individual (Last, First, Middle Ini Howat, James, Christopher, ,	<u> </u>	Date of Receipt
Mailing Address 250 Daniel Burnham Sq Unit	504	04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbus	State Zip Code OH 43215	Transaction ID : SA11AI.29001
FEC ID number of contributing	102.0	Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Motorists Insurance	EVP	Payroll Deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) ▼	400.00	
Full Name of Individual (Last, First, Middle Ini Howat, James, Christopher, ,	, <u> </u>	Date of Receipt
Mailing Address 250 Daniel Burnham Sq Unit 8	504	05 03 2019
City	State Zip Code	Transaction ID : SA11AI.29045
Columbus	OH 43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) EVP	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt
Mailing Address 250 Daniel Burnham Sq Unit	504	05 17 2019
City	State Zip Code	Transaction ID : SA11AI.29088
Columbus	OH 43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) EVP	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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53 22 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 31 2019 City Zip Code State Transaction ID: SA11AI.29133 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 06 2019 14 City State Zip Code Transaction ID: SA11AI.29176 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Howat, James, Christopher, Date of Receipt Mailing Address 250 Daniel Burnham Sq Unit 504 28 2019 City Zip Code State Transaction ID: SA11AI.29219 OH Columbus 43215 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Insurance Payroll Deduction **EVP** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and or for commercial purposes, other than using the succession of the successi	d Statements may no the name and addres	t be sold or used by any pe ss of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUI	RANCE COMF	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Kaufman, David L., , , Mailing Address 7925 Greenside Lane	Initial) or Full Organi	zation Name	Date of Receipt
			02 08 2019
City Worthington	State 2	Zip Code 43235	Transaction ID : SA11Al.28766 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	eral political committee.		
Name of Employer (for Individual) Motorists Mutual Ins Co Receipt For: Primary General Other (specify) ▼		on (for Individual) e VP & COO to-Date ▼ 300.00	Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Kaufman, David L., , , Mailing Address 7925 Greenside Lane	Initial) or Full Organi.	zation Name	Date of Receipt 02 22 2019
City		Zip Code	Transaction ID : SA11AI.28812
Worthington FEC ID number of contributing federal political committee.	С	43235	Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Motorists Mutual Ins Co		on (for Individual) e VP & COO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle C. Kaufman, David L., , ,	Initial) or Full Organia	zation Name	Date of Receipt
Mailing Address 7925 Greenside Lane	104-4-	7: 0 - 1 -	03 08 2019
City Worthington	State 2	Zip Code 43235	Transaction ID : SA11AI.28857 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) Motorists Mutual Ins Co		on (for Individual) VP & COO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		>	300.00
TOTAL This Period (last page this line number	er only)		

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may no he name and addres	t be sold or used by any pess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMF	PANY CIVIC FUND						
Full Name of Individual (Last, First, Middle I Kaufman, David L., , , Mailing Address 7925 Greenside Lane	nitial) or Full Organi	zation Name	Date of Receipt					
	State	Zip Code	03 22 2019					
City	Transaction ID : SA11AI.28915 Amount of Each Receipt this Period							
	Worthington OH 43235							
FEC ID number of contributing federal political committee.	C		100.00					
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item					
Motorists Mutual Ins Co	Executive	e VP & COO	Payroll Deduction					
Receipt For:	Aggregate Year	-to-Date ▼						
Primary General Other (specify) ▼	7	600.00						
Full Name of Individual (Last, First, Middle I Kaufman, David L. , , ,	nitial) or Full Organi	zation Name	Date of Receipt					
Mailing Address 7925 Greenside Lane			04 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City		Zip Code	Transaction ID : SA11AI.28960					
Worthington	ОН	43235	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	100.00							
Name of Employer (for Individual) Motorists Mutual Ins Co		on (for Individual) e VP & COO	Memo Item Payroll Deduction					
Receipt For:	Aggregate Year	-to-Date ▼						
Primary General Other (specify) ▼		700.00						
Full Name of Individual (Last, First, Middle I	nitial) or Full Organi	zation Name	Date of Receipt					
Mailing Address 7925 Greenside Lane			04 19 2019					
City Worthington	State OH	Zip Code 43235	Transaction ID : SA11AI.29004					
		.5200	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer (for Individual)		on (for Individual)	Memo Item					
Motorists Mutual Ins Co	e VP & COO	Payroll Deduction						
Receipt For: Primary General	Aggregate Year	-to-Date ▼	. [
Other (specify)		800.00						
SUBTOTAL of Receipts This Page (optional)		>	300.00					
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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	IRANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Kaufman, David L., , , Mailing Address 7925 Greenside Lane	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	05 03 2019 Transaction ID : SA11AI.29048
Worthington	OH 43235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Individual) Executive VP & COO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name of Individual (Last, First, Middle Kaufman, David L., , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 7925 Greenside Lane		05 17 2019
City Worthington	State Zip Code OH 43235	Transaction ID : SA11AI.29086
FEC ID number of contributing federal political committee.	C 43233	Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Individual) Executive VP & COO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 7925 Greenside Lane		05 31 2019
City Worthington	State Zip Code OH 43235	Transaction ID : SA11AI.29135 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation (for Individual) Executive VP & COO	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)	300.00
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not the name and address	be sold or used by any per of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPA	ANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I Kaufman, David L., , , Mailing Address 7925 Greenside Lane	nitial) or Full Organiza	tion Name	Date of Receipt
Maining Address 7923 Greenside Lane			06 14 2019
City	Transaction ID : SA11AI.29178		
Worthington	43235	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item
Motorists Mutual Ins Co	Executive \	/P & COO	Payroll Deduction
Receipt For:	Aggregate Year-to	o-Date ▼	
Primary General Other (specify) ▼	4	1200.00	
Full Name of Individual (Last, First, Middle I 3. Kaufman, David L., , ,	Initial) or Full Organiza	ation Name	Date of Receipt
Mailing Address 7925 Greenside Lane			06 28 2019
City		o Code	Transaction ID : SA11AI.29221
Worthington	OH 4	3235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		100.00	
Name of Employer (for Individual) Motorists Mutual Ins Co	Occupation Executive V	(for Individual) VP & COO	Memo Item Payroll Deduction
Receipt For:	Aggregate Year-to	o-Date ▼	
Primary General Other (specify) ▼	4	1300.00	
Full Name of Individual (Last, First, Middle I	Initial) or Full Organiza	tion Name	Date of Receipt
Mailing Address 3910 Caswell Road			05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Johnstown		o Code 3031	Transaction ID : SA11AI.29136 Amount of Each Receipt this Period
FEC ID number of contributing			_
federal political committee.	C		20.00
Name of Employer (for Individual)		(for Individual)	Memo Item
Motorists Mutual Ins. Co. Receipt For:	VP and CIC		Payroll Deduction
Primary General	Aggregate Year-to	o-Date ▼	
Other (specify)	4	220.00	
SUBTOTAL of Receipts This Page (optional)			220.00
TOTAL This Period (last page this line numbe	er only)		

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle Ini Kessler, John C., , , Mailing Address 3910 Caswell Road	itial) or Full Organization Name	Date of Receipt				
City	State Zip Code	06 14 2019 Transaction ID : SA11Al.29179				
Johnstown	OH 43031	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) VP and CIO	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify) Other	Aggregate Year-to-Date ▼ 240.00	1 ayloli Deduction				
Full Name of Individual (Last, First, Middle Ini Kessler, John C., , , Mailing Address 3910 Caswell Road	itial) or Full Organization Name	Date of Receipt				
City Johnstown	State Zip Code OH 43031	Transaction ID : SA11Al.29222 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual) Motorists Mutual Ins. Co.	Occupation (for Individual) VP and CIO	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260,00					
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt				
Mailing Address 116 Clarke Lane		05 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Hopkinton	State Zip Code NH 03229	Transaction ID : SA11AI.29052 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual) Phenix Mutual Fire Ins. Co.	Occupation (for Individual) Sr. V.P.	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 225.00					
SUBTOTAL of Receipts This Page (optional)	•	65.00				
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 2019 17 City Zip Code State Transaction ID: SA11AI.29083 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co. Sr. V.P. Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 05 31 2019 City State Zip Code Transaction ID: SA11AI.29138 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Phenix Mutual Fire Ins. Co. Payroll Deduction Sr. V.P. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lawrence, Todd, , Mr., Date of Receipt Mailing Address 116 Clarke Lane 14 2019 City State Zip Code Transaction ID: SA11AI.29181 NH Hopkinton 03229 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Phenix Mutual Fire Ins. Co. Sr. V.P. Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 75.00

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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND				
Α.	Full Name of Individual (Last, First, Middle Initial Lawrence, Todd, , Mr., Mailing Address 116 Clarke Lane	al) or Full Org	anization Name	Date of Receipt			
	City	Otata	7in Codo	06 28 2019			
	City Hopkinton	State NH	Zip Code 03229	Transaction ID : SA11AI.29224 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer (for Individual)	1 .	ation (for Individual)	Memo Item			
	Phenix Mutual Fire Ins. Co.	Sr. V.	P. ear-to-Date ▼	Payroll Deduction			
	Receipt For: Primary General Other (specify) ▼						
В.	Full Name of Individual (Last, First, Middle Initial Marshall, Brandon, , ,	al) or Full Org	anization Name	Date of Receipt			
	Mailing Address 74 Cassidy Dr.	State	Zip Code	05 03 7 2019			
	City Winfield	Transaction ID : SA11AI.29054					
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 25.00					
	Name of Employer (for Individual) Brickstreet Insurance	Occup VP	eation (for Individual)	Memo Item Payroll Deduction			
	Receipt For: Primary General Other (specify) ▼	Primary General Agglegate Teal-10-Date V					
С .	Full Name of Individual (Last, First, Middle Initial Marshall, Brandon, , ,	Date of Receipt					
	Mailing Address 74 Cassidy Dr.			05 17 2019			
	City Winfield	State WV	Zip Code 25213	Transaction ID : SA11AI.29081 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer (for Individual) Brickstreet Insurance	Occup VP	ation (for Individual)	Memo Item Payroll Deduction			
	Receipt For:	Aggregate Ye	ear-to-Date ▼				
	Other (specify)	Primary General Other (specify) 250.00					
H	SUBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			75.00			

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	the name and address of any political committee					
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle Marshall, Brandon, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 74 Cassidy Dr.		05 31 2019				
City	State Zip Code	Transaction ID : SA11AI.29140				
Winfield	WV 25213	_ Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual)	Memo Item					
Brickstreet Insurance	Brickstreet Insurance VP					
Receipt For:	Aggregate Year-to-Date ▼]				
Primary General						
Other (specify) ▼	275.00					
Full Name of Individual (Last, First, Middle Marshall, Brandon, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 74 Cassidy Dr.		06 14 2019				
City	State Zip Code	Transaction ID : SA11AI.29183				
Winfield	WV 25213	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	25.00				
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Individual) VP	Memo Item Payroll Deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle Cast, First, Middle C	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 74 Cassidy Dr.		06 28 2019				
City	State Zip Code	Transaction ID : SA11AI.29226				
Winfield	WV 25213	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual) Brickstreet Insurance	Occupation (for Individual) VP	Memo Item Payroll Deduction				
Receipt For:	Aggregate Year-to-Date ▼	- ·				
Primary General						
Other (specify)	325.00					
SUBTOTAL of Receipts This Page (optional).		75.00				
TOTAL This Period (last page this line number	er only)					

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle I McCracken, Robert, L., Mr., Mailing Address 2135 Hunters Ridge Court City Manitowoc FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	Date of Receipt 03 01 2019 Transaction ID: SA11AI.29274 Amount of Each Receipt this Period 250.00 Memo Item	
Full Name of Individual (Last, First, Middle McCracken, Robert, L., Mr., Mailing Address 2135 Hunters Ridge Court City Manitowoc FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Co. Receipt For: Primary General Other (specify)	State Zip Code WI 54220 C Occupation (for Individual) Director Aggregate Year-to-Date 500.00	Date of Receipt 05
Full Name of Individual (Last, First, Middle I McGee, Bill, , , Mailing Address 48 E. Frankfort St. City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code OH 43206 C Occupation (for Individual) SVP Aggregate Year-to-Date ▼ 240.00	Date of Receipt Max
SUBTOTAL of Receipts This Page (optional)	>	540.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using	g the name and address of any political committee						
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	JRANCE COMPANY CIVIC FUND						
Full Name of Individual (Last, First, Middle McGee, Bill, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 48 E. Frankfort St.		04 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.28966					
Columbus	OH 43206	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Motorists Insurance	SVP	Payroll Deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	280.00	1					
	7 7 7	'					
Full Name of Individual (Last, First, Middle McGee, Bill, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 48 E. Frankfort St.		04 19 2019					
City	State Zip Code	Transaction ID : SA11AI.29010					
Columbus	OH 43206	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	°						
Name of Employer (for Individual) Motorists Insurance	Occupation (for Individual) SVP	Memo Item Payroll Deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00]					
Full Name of Individual (Last, First, Middle C. McGee, Bill, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 48 E. Frankfort St.		05 03 2019					
City	State Zip Code	Transaction ID : SA11AI.29055					
Columbus	OH 43206	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Motorists Insurance	SVP	Payroll Deduction					
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify)	360.00]					
SUBTOTAL of Receipts This Page (optional	l)	120.00					
TOTAL This Period (last page this line num	iber only)						

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND

MOTORISTS MUTUAL INS Full Name of Individual (Last, First, Midd					
A. McGee, Bill, , ,	,		Date of Receipt		
Mailing Address 48 E. Frankfort St.			05 17 2019		
City	State	Zip Code	Transaction ID : SA11AI.29080		
Columbus	Columbus OH 43206				
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance	Occup SVP	oation (for Individual)	Memo Item Payroll Deduction		
Receipt For:	Aggregate Y	/ear-to-Date ▼			
Primary General Other (specify) ▼	55 5	400.00			
Full Name of Individual (Last, First, Midd McGee, Bill, , ,	le Initial) or Full Orç	ganization Name	Date of Receipt		
Mailing Address 48 E. Frankfort St.	I-		05 31 2019		
City	State	Zip Code	Transaction ID : SA11AI.29141		
Columbus	OH	43206	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance	Occu SVP	pation (for Individual)	Memo Item Payroll Deduction		
Receipt For:	Aggregate Y	∕ear-to-Date ▼			
Primary General Other (specify) ▼		440.00			
Full Name of Individual (Last, First, Midd C. McGee, Bill, , ,	le Initial) or Full Orç	ganization Name	Date of Receipt		
Mailing Address 48 E. Frankfort St.			06 14 2019		
City	State	Zip Code	Transaction ID : SA11AI.29184		
Columbus	ОН	43206	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer (for Individual) Motorists Insurance	Occup SVP	pation (for Individual)	Memo Item Payroll Deduction		
Receipt For:	Aggregate Y	'ear-to-Date ▼			
Primary General Other (specify)		480.00			
SUBTOTAL of Receipts This Page (options TOTAL This Period (last page this line nur		·	120.00		

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McGee, Bill, , , Date of Receipt Mailing Address 48 E. Frankfort St. 2019 City Zip Code State Transaction ID: SA11AI.29227 OH Columbus 43206 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP Motorists Insurance Payroll Deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 05 2019 City State Zip Code Transaction ID: SA11AI.29056 OH Columbus 43219 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Insurance Co Payroll Deduction Chief Legal Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Moore, Marchelle, , , Date of Receipt Mailing Address 2717 Gatewood Rd. 17 2019 City State Zip Code Transaction ID: SA11AI.29079 OH Columbus 43219 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll Deduction Motorists Mutual Insurance Co Chief Legal Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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

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NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSU	RANCE COM	PANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	Initial) or Full Organ	ization Name	Date of Receipt
City	State	Zip Code	05 31 2019
Columbus	OH	43219	Transaction ID : SA11AI.29142 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) Motorists Mutual Insurance Co		on (for Individual) gal Officer	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 275.00	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , , Mailing Address 2717 Gatewood Rd.	Initial) or Full Organ	ization Name	Date of Receipt
0.1	04-1	7'm Onda	06 14 2019
City Columbus	State OH	Zip Code 43219	Transaction ID : SA11AI.29185
FEC ID number of contributing federal political committee.	С	43213	Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Motorists Mutual Insurance Co		on (for Individual) gal Officer	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle Moore, Marchelle, , ,	Initial) or Full Organ	ization Name	Date of Receipt
Mailing Address 2717 Gatewood Rd.	0	Zin Codo	06 28 2019
City Columbus	State OH	Zip Code 43219	Transaction ID : SA11AI.29228
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Motorists Mutual Insurance Co		on (for Individual) gal Officer	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year	-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional).			75.00
TOTAL This Period (last page this line numb	er only)		

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Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pole name and address of any political committee	person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	RANCE COMPANY CIVIC FUND)
Full Name of Individual (Last, First, Middle Ir Obrokta, TJ, , , Mailing Address 8810 Ventura Way	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	03 08 2019
Dublin	OH 43016	Transaction ID : SA11AI.28887 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) President	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle Ir Obrokta, TJ, , , Mailing Address 8810 Ventura Way	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	03 22 2019
Dublin	OH 43016	Transaction ID : SA11AI.28924 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) President	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00]
Full Name of Individual (Last, First, Middle Ir	nitial) or Full Organization Name	Date of Receipt
Mailing Address 8810 Ventura Way		04 05 2019
City Dublin	State Zip Code OH 43016	Transaction ID : SA11AI.28969
FEC ID number of contributing federal political committee.	C 43016	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) President	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00]
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	r only)	

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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used be name and address of any political controls.	by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUE	RANCE COMPANY CIVIC F	FUND			
Full Name of Individual (Last, First, Middle Obrokta, TJ, , ,	Initial) or Full Organization Name	Date of Receipt			
Mailing Address 8810 Ventura Way	Mailing Address 8810 Ventura Way				
City	State Zip Code	Transaction ID : SA11AI.29013			
Dublin	OH 43016	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Motorists Insurance Group	President	Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	400	.00			
Full Name of Individual (Last, First, Middle Obrokta, TJ, , ,	Initial) or Full Organization Name	Date of Receipt			
Mailing Address 8810 Ventura Way		05 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code	Transaction ID : SA11AI.29058			
Dublin	OH 43016	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual) Motorists Insurance Group	Occupation (for Individual) President	Memo Item Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	450	0.00			
Full Name of Individual (Last, First, Middle Obrokta, TJ, , ,	Initial) or Full Organization Name	Date of Receipt			
Mailing Address 8810 Ventura Way		05 17 2019			
City Dublin	State Zip Code 43016	Transaction ID : SA11AI.29077 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Motorists Insurance Group	President	Payroll Deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	500	0.00			
SUBTOTAL of Receipts This Page (optional).		150.00			
TOTAL This Period (last page this line number	er only)				

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NAME OF COMMITTEE (In Full)

	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURAN	ICE CO	MPANY CIVIC FUN	ND		
١.	Full Name of Individual (Last, First, Middle Initial) Obrokta, TJ, , ,) or Full Or	ganization Name	Date of Receipt	_	
-	Mailing Address 8810 Ventura Way			05 31 2019	Y	
	City	State OH	Zip Code	Transaction ID : SA11AI.29144		
-	Dublin	ОП	43016	Amount of Each Receipt this Period	t e	
	FEC ID number of contributing federal political committee.	С			.00	
	Name of Employer (for Individual)		pation (for Individual)	Memo Item		
_	Motorists Insurance Group	Presi		Payroll Deduction		
ı	Receipt For: Primary General	Aggregate \	/ear-to-Date ▼			
	Other (specify) ▼		550.00			
3.	Full Name of Individual (Last, First, Middle Initial) Obrokta, TJ, , ,	Date of Receipt				
_	Mailing Address 8810 Ventura Way	ddress 8810 Ventura Way				
	City	State	Zip Code	Transaction ID : SA11AI.29187		
_	Dublin	ОН	43016	Amount of Each Receipt this Period	d	
	FEC ID number of contributing federal political committee.	С		50	.00	
Ī	Name of Employer (for Individual) Motorists Insurance Group	Occu Presi	pation (for Individual)	Memo Item Payroll Deduction		
Ì	Receipt For:	Aggregate Y	/ear-to-Date ▼			
	Primary General	· ·		\neg		
	Other (specify) ▼		, 600.00			
). _	Full Name of Individual (Last, First, Middle Initial) Obrokta, TJ, , ,) or Full Or	ganization Name	Date of Receipt		
_	Mailing Address 8810 Ventura Way	T-		06 28 2019	Y	
	City	State	Zip Code	Transaction ID : SA11AI.29230		
-	Dublin	ОН	43016	Amount of Each Receipt this Period	t l	
	FEC ID number of contributing federal political committee.	С			.00	
1	Name of Employer (for Individual) Motorists Insurance Group			Memo Item Payroll Deduction		
Ì	Receipt For:					
	Primary General Other (specify)		650.00			
su	JBTOTAL of Receipts This Page (optional)			▶ 150.	.00	
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	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIVIC FUND	
Α.	Full Name of Individual (Last, First, Middle Initial Puleo, Pamela, , , Mailing Address 57 Millstone Drive	al) or Full Or	ganization Name	Date of Receipt
	- Maining / Mariese 3/ Millistoffe Brive			05 30 2019
	City	State NH	Zip Code	Transaction ID : SA11AI.29282
	Concord	INIT	03301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer (for Individual) Phenix Mutual	Occu Direc	pation (for Individual) ctor	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 300.00	
В.	Full Name of Individual (Last, First, Middle Initial Rader, David, , ,	Date of Receipt		
	Mailing Address 2452 SW 50th Blvd	03 01 7 2019		
	City Gainesville	State FL	Zip Code 32608	Transaction ID : SA11AI.29272 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer (for Individual) Motorists	Occu	pation (for Individual) ctor	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
С .	Full Name of Individual (Last, First, Middle Initial Rader, David, , ,	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 2452 SW 50th Blvd			05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Gainesville	State FL	Zip Code 32608	Transaction ID : SA11AI.29279 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Motorists	Occu Direc	pation (for Individual) tor	Memo Item
	Receipt For: Primary General	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify)		1000.00	
H	SUBTOTAL of Receipts This Page (optional)		<u> </u>	1150.00

FOR LINE NUMBER:					PAGE	 40 (OF	53	3	
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Ini Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue	itial) or Full Organization Name	Date of Receipt 05 03 2019
City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify) ▼	State Zip Code OH 43085 C Occupation (for Individual) VP Planning Prod & Svs Aggregate Year-to-Date ▼ 225.00	Transaction ID : SA11AI.29062 Amount of Each Receipt this Period 25.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle Ini Rudowicz, Randolph A., , ,) Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43085 C Occupation (for Individual) VP Planning Prod & Svs Aggregate Year-to-Date 250.00	Date of Receipt M
Full Name of Individual (Last, First, Middle Ini Rudowicz, Randolph A., , , Mailing Address 1026 Loch Ness Avenue City Worthington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code OH 43085 C Occupation (for Individual) VP Planning Prod & Svs Aggregate Year-to-Date 275.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	75.00
TOTAL This Period (last page this line number	only)	

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	_ 4	11	OF	53	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rudowicz, Randolph A., , , Date of Receipt Mailing Address 1026 Loch Ness Avenue 2019 City State Zip Code Transaction ID: SA11AI.29191 Worthington OH 43085 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Planning Prod & Svs Payroll Deduction Motorists Mutual Ins. Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rudowicz, Randolph A., , , Date of Receipt Mailing Address 1026 Loch Ness Avenue 06 2019 City State Zip Code Transaction ID: SA11AI.29234 Worthington OH 43085 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Motorists Mutual Ins. Company Payroll Deduction VP Planning Prod & Svs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325,00

		4 4	
Full Name of Individual (Last, First, Middle In Walz, Chris, , ,	Date of Receipt		
Mailing Address PO Box 832	05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID : SA11AI.29151
Hurricane	WV	25526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
Brickstreet Insurance	AVP		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 220.00	
LIDTOTAL of Descripts This Daws (settional)			70.00

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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND					
Full Name of Individual (Last, First, Middle In Walz, Chris, , , Mailing Address PO Box 832	itial) or Full Organization Name	Date of Receipt				
City Hurricane FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For:	State Zip Code WV 25526 C Occupation (for Individual) AVP Aggregate Year-to-Date ▼	Transaction ID: SA11AI.29194 Amount of Each Receipt this Period 20.00 Memo Item Payroll Deduction				
Other (specify) ▼ Full Name of Individual (Last, First, Middle In	Il Name of Individual (Last, First, Middle Initial) or Full Organization Name					
Mailing Address PO Box 832 City Hurricane FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brickstreet Insurance Receipt For: Primary General Other (specify) ▼	State Zip Code WV 25526 C Occupation (for Individual) AVP Aggregate Year-to-Date ▼ 260.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Full Name of Individual (Last, First, Middle In Western, Robert, L., Mr., Mailing Address 5203 South 8th Street City Sheboygan FEC ID number of contributing federal political committee. Name of Employer (for Individual) Wilson Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code WI S3081 C Occupation (for Individual) President Aggregate Year-to-Date 250.00	Date of Receipt M M M / 01 / 2019 Transaction ID: SA11AI.29275 Amount of Each Receipt this Period 250.00 Memo Item				
SUBTOTAL of Receipts This Page (optional)	>	290.00				
TOTAL This Period (last page this line number	only)	1171171171				

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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Western, Robert, L., Mr., Mailing Address 5203 South 8th Street City Sheboygan FEC ID number of contributing federal political committee. Name of Employer (for Individual) Wilson Mutual Ins. Company Receipt For: Primary General Other (specify)	State Zip Code WI 53081 C Occupation (for Individual) President Aggregate Year-to-Date 500.00	Date of Receipt M M M / 30 2019 Transaction ID: SA11Al.29281 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle In White, Steven, , , Mailing Address 600 Kanawha Blvd 1203 City Charleston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Receipt For: Primary General Other (specify)	State Zip Code WV 25301 C Occupation (for Individual) Director Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / D D / 2019 Transaction ID: SA11Al.29273 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle In White, Steven, , , Mailing Address 600 Kanawha Blvd 1203 City Charleston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Receipt For: Primary General Other (specify)	State Zip Code WV 25301 C Occupation (for Individual) Director Aggregate Year-to-Date 500.00	Date of Receipt Mode
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numbe	r only)	

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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSUR	ANCE COMPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle In Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) EVP Aggregate Year-to-Date ▼ 250.00	Date of Receipt 03 08 2019 Transaction ID: SA11AI.28877 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation (for Individual) EVP Aggregate Year-to-Date ▼ 300.00	Date of Receipt 03 22 2019 Transaction ID : SA11Al.28934 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
Full Name of Individual (Last, First, Middle In Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Motorists Insurance Group Receipt For: Primary General Other (specify)	· ·	Date of Receipt M M M OS 2019 Transaction ID: SA11AI.28978 Amount of Each Receipt this Period 50.00 Memo Item Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
TOTAL This Period (last page this line number	r only)	

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	y information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) MOTORISTS MUTUAL INSURA	ANCE CO	MPANY CIVIC FUND					
Α.	Full Name of Individual (Last, First, Middle Initial Wilcox, Matt, , ,	ial) or Full Org	ganization Name	Date of Receipt				
	Mailing Address 250 Daniel Burnham Sq Unit 3	08		04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID : SA11AI.29022				
	Columbus	ОН	43215	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		50.00					
	Name of Employer (for Individual) Motorists Insurance Group	oation (for Individual)	Memo Item Payroll Deduction					
	Receipt For: Primary General Other (specify) ▼							
В.	Full Name of Individual (Last, First, Middle Initi Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Unit 30	Date of Receipt						
	Maining Address 250 Daniel Burnham Sq Offic St	05 03 2019						
	City	State	Zip Code	Transaction ID : SA11AI.29067				
	Columbus	ОН	43215	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual) Motorists Insurance Group							
	Receipt For:	Aggregate Y	'ear-to-Date ▼					
	Primary General Other (specify) ▼		450.00					
	Full Name of Individual (Last, First, Middle Initi Wilcox, Matt, , ,	ial) or Full Org	ganization Name	Date of Receipt				
Ο.	Mailing Address 250 Daniel Burnham Sq Unit 3	08		05 17 2019				
	City	State	Zip Code	Transaction ID : SA11AI.29068				
	Columbus	ОН	43215	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
	Motorists Insurance Group	EVP	•	Payroll Deduction				
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 500.00					
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		<u> </u>	150.00				

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may n the name and addre	not be sold or used by any pess of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (IN Full) MOTORISTS MUTUAL INSU	RANCE COM	IPANY CIVIC FUND	
Full Name of Individual (Last, First, Middle Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Ui		nization Name	Date of Receipt 05 31 2019
City	State	Zip Code	Transaction ID : SA11AI.29153
Columbus	OH	43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa EVP	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼			
Full Name of Individual (Last, First, Middle Wilcox, Matt, , , Mailing Address 250 Daniel Burnham Sq Ur	Date of Receipt		
City	State	Zip Code	06 14 2019
Columbus	OH	43215	Transaction ID : SA11AI.29196 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupa EVP	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle Wilcox, Matt, , ,	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 250 Daniel Burnham Sq U			06 28 2019
City Columbus	State OH	Zip Code 43215	Transaction ID : SA11AI.29239
FEC ID number of contributing federal political committee.	C	10210	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Motorists Insurance Group	Occupat EVP	tion (for Individual)	Memo Item Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)			150.00
TOTAL This Period (last page this line numb	per only)		7870.00

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S	CHEDULE B (FEC Form 3X)	FOR LIN				E NUMBER: PAGE 47 OF 53			
ΙT	EMIZED DISBURSEMENTS		arate schedule(s)		neck only one)				
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	ny information copied from such Reports and States for commercial purposes, other than using the nar								
	NAME OF COMMITTEE (In Full)								
	MOTORISTS MUTUAL INSURAN	CE COM	IPANY CIV	IC FU	JNE)			
_	Full Name (Last, First, Middle Initial)								
A.	Campaign to Elect Mitch Carmicha	ael 				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y			
	Mailing Address po box 403								
	City ripley	State WV	Zip Code 25271			FEC Identification Number			
	Purpose of Disbursement		23271			C			
	contribution			Ι.		Transaction ID : SB29.29249			
	Candidate Name			Cate					
	Office Sought: House Disburse	ment For:		Ту	pe	1000.00			
	Senate Sought.	Primary	General			7 7 7			
	President	Other (spec	cify) 🔻			Memo Item			
_	State: District:								
В.	Full Name (Last, First, Middle Initial) Citizens for Hottinger	Date of Disbursement							
	Citizeris for Flottinger					M M / D D / Y Y Y Y			
	Mailing Address 2135 Horns Hill Drive	05 28 2019							
	City		FEC Identification Number						
	Newark Purpose of Disbursement	ОН	43055	_		C			
	contribution					Transaction ID : SB29.29254			
	Candidate Name	Category/							
	Office Sought: House Disburser	ment For:		Ty	pe	1000.00			
	Senate	Primary	General			4 4			
	President State: District:	Other (spec	cify)			Memo Item			
_	Full Name (Last, First, Middle Initial)								
C.	Committee 4 Children					Date of Disbursement			
	Mailing Address 885 W. Mound St					04 05 2019			
	,	State	Zip Code			FEC Identification Number			
	Columbus Purpose of Disbursement	ОН	43223			C			
	contribution			Г.		Transaction ID : SB29.29245			
	Candidate Name			Cate					
	Office Sought: House Disburse	ment For:		Ту	ре	5000.00			
	Senate Sought.	Primary	General						
	President	Other (spec	cify) 🔻			Memo Item			
_	State: District:								
5	SUBTOTAL of Disbursements This Page (optional))	7000.00			
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SC	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 48 OF 53				
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	y information copied from such Reports and State for commercial purposes, other than using the nar							
	NAME OF COMMITTEE (In Full)	ne and add	iess of any politic	ai committee to	Solicit Continuations from Such Confinitiee.			
$ \rangle$	MOTORISTS MUTUAL INSURAN			C ELINID				
/	INO LONIO LO INOURAN		MI-WILL CIVI	טווט ו				
	Full Name (Last, First, Middle Initial)							
A.	Friends of George Lang	Date of Disbursement						
					M M / D D / Y Y Y Y			
	Mailing Address 7727 foxboro dr				06 07 2019			
	City	State	Zip Code		FFC Identification Number			
	west chester	OH	45069		FEC Identification Number			
	Purpose of Disbursement				C			
	Candidate Name				Transaction ID : SB29.29256			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ment For:		, ypc	1000.00			
	Senate	Primary	General		7 7 7			
	President	Other (spe	cify) ▼		Memo Item			
	State: District:							
D	Full Name (Last, First, Middle Initial)				Data of Dishurasment			
В.	Friends of Shannon Hardin				Date of Disbursement			
	Mailing Address 545 E Town St		04 05 2019					
	City		FEC Identification Number					
	Columbus Purpose of Disbursement							
	contribution				C			
	Candidate Name			Category/	Transaction ID : SB29.29244 Amount of Each Disbursement this Period			
				Type	Attribute of Each Biobarcoment this Ferrod			
		ment For:			1000.00			
	Senate President	Primary	General					
	State: OH District:	Other (spe	City)		Memo Item			
_	Full Name (Last, First, Middle Initial)							
C.	Hackett for Ohio				Date of Disbursement			
					M M / D D / Y Y Y Y			
	Mailing Address 2050 Palouse Drive				06 07 2019			
	City	State	Zip Code					
	London	OH	43140		FEC Identification Number			
	Purpose of Disbursement				C			
	contribution				Transaction ID : SB29.29255			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ment For:		Туре	1000.00			
	Senate Seagni.	Primary	General		4 4 1 4			
	President	Other (spe			Memo Item			
	State: District:				Memo Item			
S	UBTOTAL of Disbursements This Page (optional)			······	3000.00			
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SCHEDULE B (FEC Form 3X)			FOR LINE	IE NUMBER: PAGE 49 OF 53			
ITEMIZED DISBURSEMENTS		parate schedule(s h category of the	(orlean on	· — · —			
		d Summary Page	21b		26 27 29 30b		
Anninformation coming from such Deposits and Ch							
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NAME OF COMMITTEE (In Full)							
$ \; angle$ MOTORISTS MUTUAL INSURA	NCE CO	MPANY CIV	IC FUND				
Full Name (Last, First, Middle Initial)				1			
A. Klein Committee				Date of Disburs	sement		
				M M / D D / Y Y Y Y			
Mailing Address 545 East Town St.				01	31 2019		
City	State	Zip Code		FEC Identificati	ion Number		
Columbus	ОН	43215			OII Number		
Purpose of Disbursement contribution							
Candidate Name					on ID : SB29.29243		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbut	sement For:		1,700	- ' ' ' ' '	500.00		
Senate	Primary	General		7 7			
President	Other (sp	ecify) 🔻		Memo Item	1		
State: District:							
Full Name (Last, First, Middle Initial) B. OIIPAC				Date of Disburs	sement		
J. OIIPAC		M M / D					
Mailing Address 172 East State Street P. O. Box 816							
City		FEC Identificati	on Number				
Columbus Purpose of Disbursement							
Contribution				C	n ID : SB29.29242		
Candidate Name			Category/		h Disbursement this Period		
			Type		050.00		
Office Sought: House Disbut	sement For:	General		1 7	250.00		
President	Other (sp						
State: District:		,,		Memo Item	1		
Full Name (Last, First, Middle Initial)							
C. OIIPAC				Date of Disburs	sement		
Mailing Address 172 East State Street				05 / D	28 2019		
P. O. Box 816					2010		
City	State	Zip Code		FEC Identificati	ion Number		
Columbus	OH	43216	Г				
Purpose of Disbursement contribution				C			
Candidate Name			Catagony		on ID: SB29.29253 h Disbursement this Period		
	Category/ Type						
Office Sought: House Disbut	sement For:				1500.00		
Senate	Primary	General					
State: District:	Other (sp	ecity) 🔻		Memo Item	١		
Side. District.							
SUBTOTAL of Disbursements This Page (optional	ıl)				2250.00		
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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 50 OF 53					
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NAME OF COMMITTEE (In Full)	une anu auu	icoo oi any poilli	oar committee t	o sonott contributions from such confinitiee.				
MOTORISTS MUTUAL INSURAN		ADANY CIVI	IC FLIND					
WOTOKIOTO MOTOAL INSUKAN		m / u vi OIV						
Full Name (Last, First, Middle Initial)								
A. West Virginians for Armstead				Date of Disbursement				
Mailing Address 1900 Kanawha Boulevard East				06 26 2019				
Mailing Address 1900 Nahawila Bodievard Last								
City	State	Zip Code		FEC Identification Number				
Charleston	WV	25305						
Purpose of Disbursement contribution				C				
Candidate Name			Ontrary /	Transaction ID : SB29.29258				
			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:		71: *	2800.00				
Senate	Primary	General		7 7 7				
President	Other (spe	cify) ▼		Memo Item				
State: District:								
Full Name (Last, First, Middle Initial) B.	Date of Disbursement							
.				M M / D D / Y Y Y Y				
Mailing Address								
	City State Zip Code							
City		FEC Identification Number						
Purpose of Disbursement		1		C				
				9				
Candidate Name			Category/	Amount of Each Disbursement this Period				
Office Cought			Туре					
Office Sought: House Disburse Senate	ement For: Primary	General						
President	Other (spe			п., .				
State: District:	_ (-p-	• /		Memo Item				
Full Name (Last, First, Middle Initial)								
C.				Date of Disbursement				
Mailing Addross				M M M / D D / Y Y Y Y				
Mailing Address								
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement								
. arpose or bisbursement				C				
Candidate Name			Category/	Amount of Each Disbursement this Period				
			Type	A LOUIS OF EACH PRODUCTION WITH THE PRODUCTION				
	ement For:			4-14-14-14-1				
Senate	Primary	General						
State: President State:	Other (spe	CITY) ▼		Memo Item				
State. District.								
SUBTOTAL of Disbursements This Page (optional)				2800.00				
TOTAL This Period (last page this line number only	y)			15050.00				

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	51	OF	53	
FOR L	NE 2	1a OF	FORM	3X

NAME OF COMMITTEE (In Full)

N	IOTORISTS MUTUAL INSURAN		VII AIVI CIV	IO I OIND	
A.	Full Name (Last, First, Middle Initial) Transaction ID : H4.29261				Allocated Activity or Event:
	PNC Financial Services Group, Inc.				Administrative Fundraising Exempt
	Mailing Address One Financial Parkway				Voter Drive Direct Candidate Support
	City Kalamazoo	State MI	Zip Code 49009		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	IVII	49009		Allocated Activity or Event Year-To-Date
			001	37.50	
	Activity or Event Identifier: Administrative			Category/	M M / D D / Y Y Y Y
	Administrative			Type	Date 01 02 2019
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00			37.50	37.50
— В.	Full Name (Last, First, Middle Initial) Transac	tion ID : H4	.29262	☐ Memo Item	Allocated Activity or Event:
	PNC Financial Services Group, Inc.				Administrative Fundraising Exempt
	Mailing Address One Financial Parkway	Voter Drive Direct Candidate Support			
	City State Zip Code			Public Comm (ref to party only) by PAC	
	Kalamazoo	MI	49009		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: service charge				62.50
	Activity or Event Identifier:				
	Administrative			Category/ Type	Date 02 01 2019
	FEDERAL SHARE + NONFEDERAL		SHARE	= TOTAL AMOUNT	
	I EDEITHE OF WITE	•		01171112	
	0.00		7 1 1 7	25.00	25.00
<u></u>					25.00 Allocated Activity or Event:
<u></u>	0.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc.			25.00	
C.	0.00 Full Name (Last, First, Middle Initial) Transac			25.00	Allocated Activity or Event:
C.	O.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City	tion ID : H4	.29263 Zip Code	25.00	Allocated Activity or Event: X Administrative Fundraising Exempt
C.	O.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo	tion ID : H4	29263	25.00	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C.	Pull Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing	tion ID : H4	.29263 Zip Code	25.00	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C.	O.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement:	tion ID : H4	.29263 Zip Code	25.00 Memo Item Category/	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10
<u>C</u> .	O.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier:	tion ID : H4	.29263 Zip Code	25.00 Memo Item	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10
C.	O.00 Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier:	tion ID : H4	.29263 Zip Code	25.00 Memo Item Category/ Type	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10
C.	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative	State MI	Zip Code 49009	25.00 Memo Item Category/ Type	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 Date 02 07 2019
	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative FEDERAL SHARE	State MI	Zip Code 49009	25.00 Memo Item Category/ Type SHARE	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 Date 02 07 2019 TOTAL AMOUNT
	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative	State MI	Zip Code 49009	25.00 Memo Item Category/ Type SHARE 27.60	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 Date 02 07 2019 TOTAL AMOUNT
	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 DBTOTAL of Allocated Federal and NonFederal	State MI Activity Thi	Zip Code 49009 NONFEDERAL	25.00 Memo Item Category/ Type SHARE 27.60	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 Date 02 07 2019 TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	State MI Activity Thi	Zip Code 49009 NONFEDERAL	25.00 Memo Item Category/ Type SHARE 27.60 SHARE 90.10	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 TOTAL AMOUNT 27.60 TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) Transac PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: check printing Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 0.00	State MI Activity Thi	Zip Code 49009 NONFEDERAL	Category/ Type SHARE 27.60 SHARE 90.10 NonFederal sha	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 TOTAL AMOUNT 27.60 TOTAL AMOUNT
SI	FEDERAL SHARE Drop Adlocated Federal and NonFederal FEDERAL SHARE 0.00 Dral This Period (last page for each line only)	State MI Activity Thi	Zip Code 49009 NONFEDERAL s Page NONFEDERAL	Category/ Type SHARE 27.60 SHARE 90.10 NonFederal sha	Allocated Activity or Event: X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 90.10 TOTAL AMOUNT 27.60 TOTAL AMOUNT 90.10 are to 21(a)(ii))

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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FOR LI	NE 2	1a OF	FORM	3X

NAME OF COMMITTEE (In Full)

IV	IOTORISTS MUTUAL INSURAN		VII 7 (1 4 1 O1 V	.0 . 0.15		
A.	Full Name (Last, First, Middle Initial) Transaction ID : H4.29264				Allocated Activity or Event:	
	PNC Financial Services Group, Inc.				Administrative Fundraising Exempt	
	Mailing Address One Financial Parkway				Voter Drive Direct Candidate Support	
	City	State	Zip Code		Public Comm (ref to party only) by PAC	
	Kalamazoo Purpose of Disbursement:	MI	49009		Allocated Activity or Event Year-To-Date	
	service fee				115.10	
	Activity or Event Identifier: Administrative			Category/	M = M / D = D / Y = Y = Y	
				Type	Date 03 01 2019	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	0.00		7	25.00	25.00	
<u>—</u> В.	Full Name (Last, First, Middle Initial) Transaction ID : H4.29265				Allocated Activity or Event:	
	PNC Financial Services Group, Inc.	Administrative Fundraising Exempt				
	Mailing Address One Financial Parkway	Voter Drive Direct Candidate Support				
	ty State Zip Code			Public Comm (ref to party only) by PAC		
	Kalamazoo	MI	49009	I	Allocated Activity or Event Year-To-Date	
	Purpose of Disbursement: service fee				140.10	
	Activity or Event Identifier: Administrative			Catagony	M = M / D = D / Y = Y = Y	
	Administrative			Category/ Type	Date 04 01 2019	
	FEDERAL SHARE	FEDERAL SHARE + NONFEDERAL S		SHARE	= TOTAL AMOUNT	
	0.00		7	25.00	25.00	
			Full Name (Last, First, Middle Initial) Transaction ID : H4.29266			
C.		tion ID : H4	.29266	Memo Item	Allocated Activity or Event:	
C.	PNC Financial Services Group, Inc.	tion ID : H4	.29266	☐ Memo Item	Allocated Activity or Event: X Administrative Fundraising Exempt	
<u>C</u> .		tion ID : H4	.29266	☐ Memo Item		
C.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City	State	Zip Code	☐ Memo Item	Administrative Fundraising Exempt	
C.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo			☐ Memo Item	Administrative Fundraising Exempt Voter Drive Direct Candidate Support	
c.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee	State	Zip Code	☐ Memo Item	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC	
C.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement:	State	Zip Code	Category/	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date	
C.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative	State MI	Zip Code 49009	Category/ Type	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 Date 05 01 7 2019	
C.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE	State	Zip Code	Category/ Type	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10	
c.	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative	State MI	Zip Code 49009	Category/ Type SHARE	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 Date 05 01 2019 TOTAL AMOUNT	
	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE	State MI	Zip Code 49009	Category/ Type SHARE	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 Date 05 01 2019 TOTAL AMOUNT	
	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFedera	State MI	Zip Code 49009 NONFEDERAL	Category/ Type SHARE	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 Date 05 01 2019 TOTAL AMOUNT	
sı	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE JBTOTAL of Allocated Federal and NonFedera FEDERAL SHARE 0.00	State MI + Activity Thi +	Zip Code 49009 NONFEDERAL	Category/ Type SHARE 25.00 SHARE 75.00	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 TOTAL AMOUNT TOTAL AMOUNT 75.00	
sı	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFedera FEDERAL SHARE	State MI + Activity Thi +	Zip Code 49009 NONFEDERAL	Category/ Type SHARE 25.00 SHARE 75.00	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 Date 05 / 01 / 2019 TOTAL AMOUNT 25.00	
sı	PNC Financial Services Group, Inc. Mailing Address One Financial Parkway City Kalamazoo Purpose of Disbursement: service fee Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFedera FEDERAL SHARE 0.00 OTAL This Period (last page for each line only)	State MI + Activity Thi +	Zip Code 49009 NONFEDERAL s Page NONFEDERAL	Category/ Type SHARE 25.00 SHARE 75.00	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 165.10 TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT	

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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NAME OF COMMITTEE (In Full)

Α.	Full Name (Last, First, Middle Initial) Transaction ID : H4.29267				Allocated Activity or Event:	
	PNC Financial Services Group, Inc.				X Administrative Fundraising Exempt	
	Mailing Address One Financial Parkway				Voter Drive Direct Candidate Support	
	City	State	Zip Code		Public Comm (ref to party only) by PAC	
	Kalamazoo	MI	49009	<u> </u>	Allocated Activity or Event Year-To-Date	
	Purpose of Disbursement: service fee				190.10	
	Activity or Event Identifier:			Oata nami		
	Administrative			Category/ Type	Date 06 03 2019	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	0.00		<i>T T</i>	25.00	25.00	
В.	Full Name (Last, First, Middle Initial)	Allocated Activity or Event:				
				Administrative Fundraising Exempt		
	Mailing Address				Voter Drive Direct Candidate Support	
	City	State	Zip Code		Public Comm (ref to party only) by PAC	
	Purnose of Dishursement:				Allocated Activity or Event Year-To-Date	
	Purpose of Disbursement:			· · · · ·		
	Activity or Event Identifier:			Category/	M M / D D / Y Y Y Y	
					Date	
	FEDERAL SHARE + NONFEDERAL SHARE			SHARE	= TOTAL AMOUNT	
		Г				
	7 7		T - T		Allocated Ashirity on French	
	Full Name (Last, First, Middle Initial)			☐ Memo Item	Allocated Activity or Event: Administrative Fundraising Exempt	
C.						
C.	Mailing Address				Voter Drive Direct Candidate Support	
C.	Mailing Address City	State	Zip Code			
C.	City	State	Zip Code		Voter Drive Direct Candidate Support	
C.		State	Zip Code		Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC	
C.	City	State	Zip Code		Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date	
c.	City Purpose of Disbursement:	State	Zip Code	Category/ Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC	
c.	City Purpose of Disbursement:	State	Zip Code	Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date	
c.	City Purpose of Disbursement: Activity or Event Identifier:			Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date	
c.	City Purpose of Disbursement: Activity or Event Identifier:			Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date	
	City Purpose of Disbursement: Activity or Event Identifier:	+	NONFEDERAL	Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date	
	City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE	+	NONFEDERAL	Type SHARE	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date	
	City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal	+ Activity This	NONFEDERAL S Page	Type SHARE	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT	
SU	City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	+ Activity This	NONFEDERAL S Page NONFEDERAL	Type SHARE SHARE 25.00	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT TOTAL AMOUNT 25.00	
SU	City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 0.00	+ Activity This	NONFEDERAL S Page NONFEDERAL	Type SHARE SHARE 25.00 d NonFederal sha	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT TOTAL AMOUNT 25.00	
SU	Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 0.00 OTAL This Period (last page for each line only)(+ Activity This	NONFEDERAL S Page NONFEDERAL Tre to 21(a)(i) and	Type SHARE SHARE 25.00 d NonFederal sha	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT TOTAL AMOUNT 25.00 are to 21(a)(ii))	