

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on 11/06/2018 in the State of

5. Covering Period 10/01/2018 through 10/17/2018

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

Signature of Treasurer Schwamberger, Mark, , , [Electronically Filed] Date 10/24/2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		129501.67
(b) Cash on Hand at Beginning of Reporting Period.....	189193.25	
(c) Total Receipts (from Line 19) .....	6735.76	341485.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	195929.01	470987.33
7. Total Disbursements (from Line 31).....	20150.00	295208.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	175779.01	175779.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

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

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6514.12	321811.42
(ii) Unitemized .....	221.64	19674.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6735.76	341485.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6735.76	341485.66
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6735.76	341485.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6735.76	341485.66

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10750.00	271200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	208.32
(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	208.32
29. Other Disbursements (Including Non-Federal Donations).....	9400.00	23800.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20150.00	295208.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20150.00	295208.32

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6735.76	341485.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	208.32
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6735.76	341277.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address 9300 Poundstone Pl

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2018

**Transaction ID : 455984E55C51542BBB83**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Alvarez, Carmelo, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9106 Juneau Ave

City Lubbock	State TX	Zip Code 79424-7857
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2018

**Transaction ID : 4864928FFE51870ECA9B**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Barclay, Brad, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10598 N 600 East Rd

City Stanford	State IL	Zip Code 61774-9497
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2018

**Transaction ID : D94833D4-2577-4E2D-**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Baszniak, Judy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1679 Mountain Dr  
 City Stayton State OR Zip Code 97383-1489  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2018  
**Transaction ID : 4A6E9C6AA806C64DED2C**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Bossch, Milt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 E Coconino Dr  
 City Chandler State AZ Zip Code 85249-3371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Agency/Sales Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : 4FE0B902ACAA6739B878**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Bray, Rod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19328 Briar Dr  
 City Bloomington State IL Zip Code 61705-4035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Technology Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : BF2FE072E5D24135A7EB**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Brown, Russell, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 Panorama Dr  
 City Medford State OR Zip Code 97504-5638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 17 / 2018  
**Transaction ID : 40028432808CA1745B85**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Cimons, Wayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1900 M St NW Ste 730  
 City Washington State DC Zip Code 20036-3547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 666.56

Date of Receipt 10 / 08 / 2018  
**Transaction ID : 429EA9A7F42F2748F018**  
 Amount of Each Receipt this Period 83.32  
 Memo Item

**C. Creevey, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3233 SW Marigold St  
 City Portland State OR Zip Code 97219-5307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2018  
**Transaction ID : 4FA0A95C7C0ECFFDDABE**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	633.32
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Debacker, Al, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 905 Irwin Ct N  
 City Keizer State OR Zip Code 97303-7471  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 10 / 06 / 2018  
**Transaction ID : 4AB19B83B5F60A7BDA56**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Edmonds, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18043 SW Scholls Ferry Rd  
 City Beaverton State OR Zip Code 97007-8821  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 10 / 08 / 2018  
**Transaction ID : 46E1B4ECE29726FC33B6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Engle, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 Powell Dr  
 City Bloomington State IL Zip Code 61704-4698  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 258.28

Date of Receipt 10 / 09 / 2018  
**Transaction ID : 42B8BBAB79533FCE2CC3**  
 Amount of Each Receipt this Period 8.32  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Frati, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 840 Cross Creek Dr  
 City Roseburg State OR Zip Code 97471-9839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : 422EB510977C4B34D5B0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Furer, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 5160  
 City Salem State OR Zip Code 97304-0160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : 427DA98B7E313AD20EF7**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Gourley, Corkey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39091 McKenzie Hwy  
 City Springfield State OR Zip Code 97478-8603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 14 / 2018  
**Transaction ID : 472580B6659B7357B99F**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

**A. Hardin, Denise, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11808 E Larkspur Dr  
 City Scottsdale State AZ Zip Code 85259-2729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : 78ACF4ED08AC48DCA1E2**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**B. Holt, Aubrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4125 SW Dosch Rd  
 City Portland State OR Zip Code 97239-1353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 09 / 2018  
**Transaction ID : 42658AF6502BED040BB3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Kasten, Luke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3631 Yellowstone Dr  
 City Normal State IL Zip Code 61761-9571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : 4F63B23B22EAB4A3D5F2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Keating, Michael T, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Rose Trce  
 City Saratoga Spgs State NY Zip Code 12866-6537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 14 / 2018  
**Transaction ID : 437A9F5BDE3190181ED9**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Kelley, Natalie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5010 Grange Rd Ste 102  
 City Roseburg State OR Zip Code 97471-5846  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : 45D9B7ADDC2F79FA073B**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Loftus, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 Lake Ave Apt 206  
 City Saratoga Spgs State NY Zip Code 12866-2742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1458.24

Date of Receipt 10 / 10 / 2018  
**Transaction ID : 43BD833A3BED0276EC15**  
 Amount of Each Receipt this Period 208.32  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	308.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Lulay, Teresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8388 Valley Way SE  
 City Turner State OR Zip Code 97392-9636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 10 / 2018  
**Transaction ID : 47F18C72A9DC7429DDA2**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Manning, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2822 NW Birkendene St  
 City Portland State OR Zip Code 97229-8081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2018  
**Transaction ID : 4048A12172ECF118350A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Mazun, Lidia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11106 SE Scotts Summit Ct  
 City Happy Valley State OR Zip Code 97086-9105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : 4F8DA548195A4758E3E9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 7244 W Pacific Ave

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

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : 440EA37DEAD9EECF052D**

Amount of Each Receipt this Period

Memo Item

**B. Miner, Jane Wright, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 Pheasant Xing

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

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : 40548C86E7D2FE44A031**

Amount of Each Receipt this Period

Memo Item

**C. Reece, Marci, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9078 W Polk Dr

City Littleton	State CO	Zip Code 80123-3359
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : 4F2699130C435EF25CF4**

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="237.50"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Roberts, Jody, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8226 S Reed St  
 City Littleton State CO Zip Code 80128-5672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2018  
**Transaction ID : 4EC0AE3D3EF76AC0CEE9**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Rutledge, Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3745 W 16th Street Ln  
 City Greeley State CO Zip Code 80634-3437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : 4367B0AEC097FF6139B4**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Sanchez, Christina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41764 Corte Lara  
 City Temecula State CA Zip Code 92592-6314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : 423781DA3F14815B12FB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Schreder, Joy L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 Locust Hills Pl

City Wayzata	State MN	Zip Code 55391-1972
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1175.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2018

**Transaction ID : 42BF80AF3E4329FE42D2**

Amount of Each Receipt this Period  
 125.00

Memo Item

**B. Schupbach, Schuyler, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9125 Deer Ridge Dr

City Bloomington	State IL	Zip Code 61705-7821
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 249.96

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2018

**Transaction ID : 4AC5ACFFEC36C7F4503F**

Amount of Each Receipt this Period  
 41.66

Memo Item

**C. Slater, Sean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5264 S Haleyville St

City Aurora	State CO	Zip Code 80016-4273
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2018

**Transaction ID : 4C778D98A8D06E350EE8**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	216.66
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 295 3rd St  
 Apt 5

City Lake Oswego State OR Zip Code 97034-3057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : 4E2B92AC1B46B97A74A8**

Amount of Each Receipt this Period 100.00

Memo Item

**B. Spears, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2021 SW Main St  
 Unit 36

City Portland State OR Zip Code 97205-1543

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : 44198B78D8714939A63D**

Amount of Each Receipt this Period 100.00

Memo Item

**C. Wilkerson, Emory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 Pointer Ridge Trl

City Fayetteville State GA Zip Code 30214-7403

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 14 / 2018  
**Transaction ID : 42FCAB131245B0D4E20E**

Amount of Each Receipt this Period 85.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 285.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Wimmer, Russ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1082  
 City Medford State OR Zip Code 97501-0079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 17 / 2018**  
**Transaction ID : 425AADF1EA31AED5D349**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Witt, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5208 Jones Rd SE  
 City Salem State OR Zip Code 97306-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 14 / 2018**  
**Transaction ID : 44898F26F1D04AF10D37**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Wold, Rory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 Martin Dr  
 City Medford State OR Zip Code 97501-8137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 06 / 2018**  
**Transaction ID : 4B8F8A3773A64A2C89CA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	6514.12

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement 2020 Primary

Candidate Name Capito, Shelley, Moore, ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: WV District:

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C00539825  
Transaction ID : F76AA00C66  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**B. Elise For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 500

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement 2018 General

Candidate Name Stefanik, Elise, M., ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District: 21

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C00547893  
Transaction ID : 19BF900A284  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**C. Emmer For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 998

City Anoka State MN Zip Code 55303

Purpose of Disbursement 2018 General

Candidate Name Emmer, Thomas, Earl, , Jr.

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MN District: 06

Date of Disbursement: 10 / 17 / 2018

FEC Identification Number: C00545749  
Transaction ID : 200146AD4F  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

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

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

3000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

### A. Friends Of Erik Paulsen

Date of Disbursement

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

Mailing Address P.O. Box 44369

250 Prairie Center Drive

City  
Eden Prairie

State  
MN

Zip Code  
55344

FEC Identification Number

C	C00439661
---	-----------

Transaction ID : 26AA29D7EE  
Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Purpose of Disbursement  
2018 General

011
Category/ Type

Candidate Name

Paulsen, Erik, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MN District: 03

Full Name (Last, First, Middle Initial)

### B. Huizenga For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	8

Mailing Address PO Box 254

City  
Zeeland

State  
MI

Zip Code  
49464-1509

FEC Identification Number

C	C00459297
---	-----------

Transaction ID : 07D6CCBFBA  
Amount of Each Disbursement this Period

500.00
--------

Memo Item

Purpose of Disbursement  
2018 General

011
Category/ Type

Candidate Name

Huizenga, William, Patrick, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 02

Full Name (Last, First, Middle Initial)

### C. Jeff Fortenberry For United States Congress

Date of Disbursement

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

Mailing Address PO Box 30265

City  
Lincoln

State  
NE

Zip Code  
68503

FEC Identification Number

C	C00395467
---	-----------

Transaction ID : 1C2994052D  
Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Purpose of Disbursement  
2018 General

011
Category/ Type

Candidate Name

Fortenberry, Jeffrey, Lane, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NE District: 01

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

2500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Perlmutter For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018
Mailing Address 3440 Youngfield Street #264		FEC Identification Number C C00410639 <b>Transaction ID : D1C5D12E7B</b>
City Wheat Ridge	State CO	Zip Code 80033
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Perlmutter, Edwin, George, ,</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 07	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Poliquin For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address PO Box 50		FEC Identification Number C C00518654 <b>Transaction ID : 8B5407139A7</b>
City Oakland	State ME	Zip Code 04963
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Poliquin, Bruce, Lee, ,</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ME District: 02	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Randy Hultgren For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018
Mailing Address PO Box 717		FEC Identification Number C C00467522 <b>Transaction ID : C6FD784597</b>
City St Charles	State IL	Zip Code 60174-0717
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Hultgren, Randall, Mark, ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	<input type="checkbox"/> Memo Item	

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Rodney For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018
Mailing Address PO Box 344		FEC Identification Number C00521948 <b>Transaction ID : 340490C4C1f</b> Amount of Each Disbursement this Period 1000.00
City Taylorville	State IL	Zip Code 62568-0344
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Davis, Rodney, Lee, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 13	

Full Name (Last, First, Middle Initial) <b>B. Roger Williams For U S Congress Committee</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2018
Mailing Address P.O. Box 91061		FEC Identification Number C00498121 <b>Transaction ID : E1C4C22148F</b> Amount of Each Disbursement this Period 500.00
City Austin	State TX	Zip Code 78709-1061
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Williams, Roger, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 25	

Full Name (Last, First, Middle Initial) <b>C. Scott For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2018
Mailing Address Post Office Box 251		FEC Identification Number C00256925 <b>Transaction ID : EAA3A223D;</b> Amount of Each Disbursement this Period 250.00
City Newport News	State VA	Zip Code 23607
Purpose of Disbursement 2018 General		Category/Type 011
Candidate Name <b>Scott, Robert, Cortez, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10750.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Alan Olsen for Oregon Senate Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 2475 N Baker Dr

City Canby State OR Zip Code 97013

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C

Transaction ID : 360D0E6826I

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Brad Witt for State Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 21740 Lindberg Rd

City Clatskanie State OR Zip Code 97016

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C

Transaction ID : 7E31079FA16

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Caddy McKeown for Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 3321 SE 20th Ave.

City Portland State OR Zip Code 97242

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C

Transaction ID : 42C62C9F2C

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Committee to Elect John Lively for State Representative, Dist. 12**

Mailing Address 1186 West D Street

City  
Springfield

State  
OR

Zip Code  
97477

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	02	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : D5AFB9F5F5

Amount of Each Disbursement this Period

500.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Alissa Keny-Guyer**

Mailing Address 519 SW Third Avenue  
Suite 801

City  
Portland

State  
OR

Zip Code  
97204

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	09	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : E67F71138D2

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Dallas Heard**

Mailing Address 89286 Cranberry Lane

City  
Bandon

State  
OR

Zip Code  
97411

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	02	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : E4C95F0B3E

Amount of Each Disbursement this Period

1000.00
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Memo Item

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

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

2000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Friends of Fred Girod**

Full Name (Last, First, Middle Initial)

Mailing Address 26232 Sitkum Road

City Lyons State OR Zip Code 97358

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C

Transaction ID : 83BBCD1D06

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Friends of Kim Wallan**

Full Name (Last, First, Middle Initial)

Mailing Address 200 S Modoc Ave

City Medford State OR Zip Code 97504

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2018

FEC Identification Number: C

Transaction ID : DAA7C9C7EC

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. FRIENDS OF LARRY LISTON COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 4045 S NONCHALANT CIR

City COLORADO SPRINGS State CO Zip Code 80917

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C

Transaction ID : 49EC161BE8

Amount of Each Disbursement this Period: 200.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2200.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF LARRY LISTON COMMITTEE**

Mailing Address 4045 S NONCHALANT CIR

City COLORADO SPRINGS State CO Zip Code 80917

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2018

FEC Identification Number

C  
Transaction ID : 6F0E6C7B4E  
Amount of Each Disbursement this Period  
200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Laurie Monnes Anderson**

Mailing Address 350 NW Wallula Ave

City Gresham State OR Zip Code 97030

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2018

FEC Identification Number

C  
Transaction ID : 6F614750A51  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Peter Courtney for State Senate**

Mailing Address 2925 Island View Dr NE

City Salem State OR Zip Code 97303

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2018

FEC Identification Number

C  
Transaction ID : 1DEA9B6C3  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

2200.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Tim Knopp for State Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address 22380 Rickard Rd

City Bend State OR Zip Code 97702

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C  
Transaction ID : D8F1B9A6B7  
Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Wilde for Oregon**

Full Name (Last, First, Middle Initial)  
Mailing Address 3390 Potter St.

City Eugene State OR Zip Code 97405

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2018

FEC Identification Number: C  
Transaction ID : 837A401E0B3  
Amount of Each Disbursement this Period: 500.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9400.00