PAGE 1 / 31

Image# 202010169296954884

**FEC** FORM 3Y

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

I OKWI 3X	For Other Than An Aut	horized Committee		Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M	5
State Farm Mutual Autom	nobile Insurance Compan	y Federal Political A	ction Committee (St	tate Farm Federal PAC)
<u> </u>				
ADDRESS (number and street) ▼	One State Farm Plaza	easurer,		
Check if different than previously reported. (ACC)	Bloomington		IL	61710-0001
2. FEC IDENTIFICATION N	UMBER ▼ CIT	Y 🛦	STATE ▲	ZIP CODE ▲
C C00544817		S THIS NEW (N)	OR AM	IENDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On: Mar	20 (M3) Jun	20 (M6) Sep	20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (  July 15 Quarterly Report (  October 15 Quarterly Report ((	Q1) (c) 12-Day PRE-Election Report for the:	Primary (12P)  Convention (120)	General (	(12G) Runoff (12R)
January 31 Year-End Report (	YE) Election		03 2020	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Election	on on	/ Y = Y = Y = Y	in the State of
5. Covering Period 1	0 01 2020	through	M M / D D /	2020
I certify that I have examined the Type or Print Name of Treasure	Schwamberger, Mark, , ,	my knowledge and bel	ef it is true, correct and	d complete.
Signature of Treasurer	wamberger, Mark, , ,	[Electronically Fi	led] Date 10	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person	signing this Report to the	ne penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2020		199798.34
	(b) Cash on Hand at Beginning of Reporting Period	220289.49	
	(c) Total Receipts (from Line 19)	4776.58	358347.73
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	225066.07	558146.07
7.	Total Disbursements (from Line 31)	22041.66	355121.66
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	203024.41	203024.41
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 BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

#### 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

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

Report Covering the Period: From:	01 2020	To: 10 14 2020
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		I
(a) Individuals/Persons Other		
Than Political Committees	4050.40	
(i) Itemized (use Schedule A)	4352.42	319188.50
(ii) Unitemized	424.16	39159.23
(iii) TOTAL (add	7 7 7 7	4 4 4
Lines 11(a)(i) and (ii)▶	4776.58	358347.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		7 7 7
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		, , , , , , , , , , , , , , , , , , , ,
11(a)(iii), (b), and (c)) (Carry		050017.70
Totals to Line 33, page 5)▶	4776.58	358347.73
2. Transfers From Affiliated/Other	200	0.00
Party Committees	0.00	0.00
B. All Loans Received	0.00	0.00
	45 45	45 45
L Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7 7	7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		200
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(	4 4	3.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Lovin Fando (nom ochedule Flo)	4 4	4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	4 4	4 4
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	4776.58	358347.73
	4 4	4 4
). Total Federal Receipts	<del> </del>	
(subtract Line 18(c) from Line 19)▶	4776.58	358347.73

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
	Operating Expenditures:  (a) Allocated Federal/Non-Federal					
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00			
	(i) I ederal Share					
	(ii) Non-Federal Share	0.00	0.00			
	(b) Other Federal Operating	0.00	55.00			
	Expenditures(c) Total Operating Expenditures	0.00	33.00			
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	55.00			
	Transfers to Affiliated/Other Party	7 7 7 7				
	Committees Contributions to	0.00	0.00			
	Federal Candidates/Committees and Other Political Committees	8000.00	284000.00			
	Independent Expenditures (use Schedule E)	0.00	0.00			
. 1	Coordinated Party Expenditures	0.00	0.00			
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
	Last Barrella M. I					
.	Loan Repayments Made	0.00	0.00			
	Loans Made	0.00	0.00			
	Refunds of Contributions To: (a) Individuals/Persons Other	4 4	4 4			
	Than Political Committees	41.66	6466.66			
	(b) Political Party Committees	0.00	0.00			
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00			
	(such as PACs)	0.00	0.00			
	(d) Total Contribution Refunds	, ,				
	(add Lines 28(a), (b), and (c))▶	41.66	6466.66			
. (	Other Disbursements (Including					
	Non-Federal Donations)	14000.00	64600.00			
	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	000	0.00			
	(b) Federal Election Activity Paid	0.00	0.00			
	Entirely With Federal Funds	0.00	0.00			
	(c) Total Federal Election Activity (add	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))	22041.66	355121.66			
	Total Fadaral Diah	4 4	4-14-14-14-14-14-14-14-14-14-14-14-14-14			
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
	from Line 31)	22044.66				
		22041.66	355121.66			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
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)	4776.58	358347.73
4. Total Contribution Refunds (from Line 28(d))	41.66	6466.66
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4734.92	351881.07
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	55.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	55.00

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

31

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) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Aaron, Troy, , , Date of Receipt Mailing Address 5110 Grand Phillips Ln 2020 City Zip Code State Transaction ID: 9F23793D-BFDA-49F3-TX Katy 77450-5531 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leadership Enterprise Dev Assc State Farm Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bryson, Katinka M, , , Date of Receipt Mailing Address 34 Country Club PI 10 2020 City State Zip Code Transaction ID: 439D852A13F34348ECD2 IL Bloomington 61701-3402 Amount of Each Receipt this Period FEC ID number of contributing 208.32 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Agency Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2083.20 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Burtis, Jeff, , , Date of Receipt Mailing Address 104 Fieldcrest Dr 05 2020 City State Zip Code Transaction ID: 432EB719494D5FA538D2 IL East Peoria 61611-2800 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1258.32 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

	_		Detailed Summary Page	<u>                                   </u>			11	<b>⊢</b>	11c	$\mathbb{H}$	12			
Ar	ly information copied from such Reports and Statem	nents may	not be sold or used by any pe	erson f	13 or the	יזוומ	14 nos		15 solicitir	la cor	16 htribut	17 ions		
or	for commercial purposes, other than using the name	ne and add	ress of any political committee	to sol	icit cor	ntrib	outio	ons fr	om su	ch cor	mmitte	ee.		
$\rangle$	NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Co	ompany F	Federal Political Action Cor	nmitte	e (St	ate	Fa	arm l	eder	al PA	(C)	_		
١.	Full Name of Individual (Last, First, Middle Initial) c Cegon, Bob, , ,	or Full Orga	anization Name		ate of	Re	ecei	ipt						
	Mailing Address 2061 Wiltsey Ct SE				10 11 2020									
	,	State	Zip Code		Trans	acti	ion	ID : 4	40A0A	55DA	FB7F	78B377C		
	Salem	OR	97306-6903	A	mount	of	Ea	ich Re	eceipt 1	his P	eriod			
	FEC ID number of contributing federal political committee.				_		7		-	_	100.0			
	Name of Employer (for Individual) State Farm	Occupa Sales I	ation (for Individual) Leader		Me	emo	o Ite	em						
		gregate Ye	ar-to-Date ▼											
	Primary General  Other (specify) ▼		1000.00											
3.	Full Name of Individual (Last, First, Middle Initial) of Ciesielski, Eric, , ,	or Full Orga	anization Name		ate of	Re	ecei	ipt						
	Mailing Address 2717 Crooked Creek Rd				10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	,	State IL	Zip Code									879A99D		
		IL.	61705-6464	-	mount	of	Ea	ich Re	eceipt 1	his P	eriod			
	FEC ID number of contributing federal political committee.		ļ	125.00										
	Name of Employer (for Individual) State Farm		ation (for Individual) resident - Counsel		Me	emo	o Ite	em						
	Primary General	gregate Ye	ar-to-Date ▼											
	Other (specify) ▼		375.00											
Э.	Full Name of Individual (Last, First, Middle Initial) of Creevey, Mark, , ,	or Full Orga	anization Name		ate of	Re	ecei	ipt						
	Mailing Address 3233 SW Marigold St	Ototo	7in Codo	4 [	10 T	1	L	13		20	20			
	,	State OR	Zip Code 97219-5307						eceipt 1			EF8B47F		
	FEC ID number of contributing federal political committee.				inoun	·	J	ich rie	sceipt	1113 1	500.0	00		
	Name of Employer (for Individual) Self Employed		ation (for Individual)		Memo Item									
			ar-to-Date ▼											
	Primary General Other (specify)		500.00											
s	UBTOTAL of Receipts This Page (optional)				_	_		_		_	725.0	00		
	OTAL This Period (last page this line number only)		·	ij							_			
•	This i ones (last page this line number only).		·····	- L	_		7	_	-	_	100			

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insur			
Full Name of Individual (Last, First, Middle Cronin, Pat, , ,  Mailing Address 286 W Coulter Rd  City Lapeer  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Self Employed  Receipt For:  Primary  Other (specify)   Other (specify)	State MI  C Occi	zip Code 48446-8691  upation (for Individual) e Farm Agent Year-to-Date ▼  1000.00	Date of Receipt  10 08 2020  Transaction ID: 4BD6AE9C1D4118382A48  Amount of Each Receipt this Period  100.00  Memo Item
Full Name of Individual (Last, First, Middle  Debacker, AI, , ,  Mailing Address 905 Irwin Ct N  City  Keizer  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Self Employed  Receipt For:  Primary  General	State OR C	Zip Code 97303-7471 upation (for Individual) te Farm Agent Year-to-Date ▼	Date of Receipt  10 11 2020  Transaction ID: 40EA904AA67F4128529B  Amount of Each Receipt this Period  30.00  Memo Item
Full Name of Individual (Last, First, Middle Fahlberg, Robin, , ,  Mailing Address 6909 W Deford Rd  City  Dunlap  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  State Farm  Receipt For:  Primary  Other (specify)	State IL Occi	Zip Code 61525-9767	Date of Receipt  10 03 2020  Transaction ID: 4EC4AFFDB00C089358F6  Amount of Each Receipt this Period  25.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	)		155.00
TOTAL This Period (last page this line numb	per only)		

31 FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 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) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fletcher, Mike, , , Date of Receipt Mailing Address 6509 Alderbrook Pl 2020 City Zip Code State Transaction ID: 4A8B97A165EF1C967425 TX McKinney 75071-6884 Amount of Each Receipt this Period FEC ID number of contributing C 83.32 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Enterprisetechexec-Engineering Receipt For: Aggregate Year-to-Date ▼ Primary General 899.92 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Frederickson, Dave, , , Date of Receipt Mailing Address 9430 Central Park Ave 10 2020 City State Zip Code Transaction ID: 47309B07DCA99A032708 IL Evanston 60203-1102 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) Self Employed State Farm Agent 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.** Guilliams, Jason, , , Date of Receipt Mailing Address 444 Colt Cir 04 2020 City Zip Code State Transaction ID: 4D84811F5FA413A94CDC OH Bellville 44813-1290 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) State Farm Sales Leader Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) 158.32 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

lm	age# 202010169296954893			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 31 (check only one)
	ny information copied from such Reports and State for commercial purposes, other than using the na			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance (	Company	Federal Political Action Con	mmittee (State Farm Federal PAC)
Α.	Full Name of Individual (Last, First, Middle Initial) Harris, Shannon, , ,	or Full Or	ganization Name	Date of Receipt
Mailing Address 5295 Dark Hollow Rd				10 02 2020
	City	State	Zip Code	Transaction ID : 4218A3E4D635DD87897B

<b>I</b> /				
Α.	Full Name of Individual (Last, First, Middle In Harris, Shannon, , ,	nitial) or Full Org	anization Name	Date of Receipt
	Mailing Address 5295 Dark Hollow Rd			10 02 2020
	City	State	Zip Code	Transaction ID : 4218A3E4D635DD87897B
	Medford	OR	97501-9627	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
	Self Employed	State	Farm Agent	
	Receipt For:	Aggregate Ye		
	Primary General	33 13		
	Other (specify) ▼		500.00	
В.	Full Name of Individual (Last, First, Middle In Herbert, Wensley J, , ,	nitial) or Full Org	anization Name	Date of Receipt
	Mailing Address 2004 Wakefield Ln		_	10 12 2020
	City	State	Zip Code	Transaction ID : 4D1F8D1C1DE09D00F0BC
	Bloomington	IL	61704-9198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer (for Individual) State Farm		oation (for Individual) Claims	Memo Item
	Receipt For:	Aggregate Ye	ear-to-Date ▼	]
	Primary General Other (specify) ▼	39.53	375.00	
<u> </u>	Full Name of Individual (Last, First, Middle In Janese, Jay, , ,	l nitial) or Full Org	anization Name	Date of Receipt
	Mailing Address 1243 S Douglas Ave			10 04 2020
	City	State	Zip Code	Transaction ID: 4F7983F602BEA097B5FA
	Arlington Heights	IL	60005-3252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.66
	Name of Employer (for Individual) Self Employed		ation (for Individual) Farm Agent	Memo Item
	Receipt For:  Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 208.30	
H	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		<u> </u>	216.66

		OR	LINE	NU	MBER	:	PAGE	1	1 (	)F	31
Use separate schedule(s) for each category of the Detailed Summary Page	(c	he	ck only	or	ne)						
		×	11a		11b		11c		12		
Johanna Janimary : age			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may 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) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jason, Launey, , , Date of Receipt Mailing Address 6005 Richwood Cir 2020 City Zip Code State Transaction ID: 4558BAD6BA3A4108DD06 GA Roswell 30076-6434 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Leadership Enterprise Dev Assc State Farm Receipt For: Aggregate Year-to-Date ▼ Primary General 291.62 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jason, Launey, , , Date of Receipt Mailing Address 6005 Richwood Cir 10 2020 City State Zip Code Transaction ID: 432782F74C71052CEE01 GA Roswell 30076-6434 Amount of Each Receipt this Period FEC ID number of contributing 83.32 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Leadership Enterprise Dev Assc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 291.62 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Keating, Michael T, , , Date of Receipt Mailing Address 9 Rose Trce 14 2020 City Zip Code State Transaction ID: 4FAD9D337DCA0074FE9E NY Saratoga Spgs 12866-6537 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Vpo Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 199.98 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	OR	LINE	NU	MBER	:	PAGE	1	2 0	F	31
Use separate schedule(s) for each category of the Detailed Summary Page	(c	he	ck only	or	ne)						
	[	X	11a		11b		11c		12		
Botanoa Cammary 1 ago			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may 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) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Krier, Jeff, , , Date of Receipt Mailing Address 1084 Valley Butte Dr 2020 City State Zip Code Transaction ID: 4E46A83CD421DE3D92EF OR Eugene 97401-7833 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) State Farm Agent Self Employed 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. Kurtenbach, Greg, , , Date of Receipt Mailing Address 477 E 300N Rd 10 10 2020 City State Zip Code Transaction ID: 405BB5ED62D67261259D Gibson City IL 60936-7130 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) Self Employed State Farm Agent 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.** Lulay, Teresa, , , Date of Receipt Mailing Address 8388 Valley Way SE 10 2020 City State Zip Code Transaction ID: 412399A0182B1030BBD8 OR Turner 97392-9636 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

lm	age# 202010169296954896			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 31 (check only one)    X   11a
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance	ce Company	/ Federal Political Action Co	mmittee (State Farm Federal PAC)
۹.	Full Name of Individual (Last, First, Middle In Marshall, Elizabeth, , , Mailing Address 6016 Garver Rd	itial) or Full O	rganization Name	Date of Receipt  10 14 2020
	City Indianapolis	State IN	Zip Code 46208-1517	Transaction ID: 4C589E0BE8D1DFD3B433  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer (for Individual) Self Employed		upation (for Individual) e Farm Agent	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 808.32	
3.	Full Name of Individual (Last, First, Middle In Marteeny, Rick, , ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 9 Bear Creek Ct			10 05 2020
	City Glen Carbon	State IL	Zip Code 62034-1377	Transaction ID : 4DA1B0A62015F374BD62  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.66
	Name of Employer (for Individual) Self Employed	I	upation (for Individual) e Farm Agent	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	00 0	Year-to-Date ▼ 208.30	1

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mathison, Deann, , , Date of Receipt Mailing Address 759 Old Orchard Ln 10 07 2020 City Zip Code State Transaction ID: 425591357F063101DEE2 OR Springfield 97477-1643 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 166.66 SUBTOTAL of Receipts This Page (optional).....

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

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	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 31 (check only one)
Any or fo	information copied from such Reports and State r commercial purposes, other than using the na	ements may ame and add	not be sold or used by any parties of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance (	Company F	Federal Political Action Co	mmittee (State Farm Federal PAC)
۷۱	ull Name of Individual (Last, First, Middle Initial) Mazun, Lidia, , , lailing Address 11106 SE Scotts Summit Ct	or Full Org	anization Name	Date of Receipt
	ity Iappy Valley	State OR	Zip Code 97086-9105	Transaction ID : 49FDA1D12693A12A36FA  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		25.00
Se	ame of Employer (for Individual) elf Employed	1 .	ation (for Individual) Farm Agent	Memo Item
Re	eceipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
3. <u>N</u>	ull Name of Individual (Last, First, Middle Initial) Melendez, Tammy, , ,	or Full Org	anization Name	Date of Receipt
_	lailing Address 7244 W Pacific Ave			10 02 2020
City State Lakewood CO		State CO	Zip Code 80227-2676	Transaction ID: 48ACAE4482F1F7612548  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.				125.00
	lame of Employer (for Individual) elf Employed		ation (for Individual) Farm Agent	Memo Item

Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Miner, Jane Wright, , , Date of Receipt Mailing Address 119 Pheasant Xing 10 01 2020 Zip Code City State Transaction ID: 4ED89D8AB1ECD3933B6B СТ Glastonbury 06033-2857 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) State Farm Agency Administration Leader Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 200.00

		FOR LINE NUMBER: PAGE 15 OF							=	31
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for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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not be sold or used by any ne	reon fo	or the r	nırı	വാട്ടെ വ	f en	licitina	cor	ntribut	ione	

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) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nelund, Gary, , , Date of Receipt Mailing Address 926 W Wellington Ct 04 2020 City Zip Code State Transaction ID: 41B69CBF2F085BE08C55 MI Norton Shores 49441-4881 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) State Farm Agent Self Employed 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. Palaian, Nick, , , Date of Receipt Mailing Address 3325 Salem Ct 10 2020 City State Zip Code Transaction ID: 4BFD88227B291A6EB103 Rochester Hills MI 48306-3054 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) Self Employed State Farm Agent 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.** Parks, Lisa, , , Date of Receipt Mailing Address 19065 Nixon Ave 13 2020 City State Zip Code Transaction ID: 4293B0DE3F014058E093 OR West Linn 97068-2154 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:						PAGE	1	l6 OF		31 17
Use separate schedule(s)	(0	(check only one)									
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any pedress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Prusakowski, John, , , Date of Receipt Mailing Address 430 Volusia Ave 13 2020 City Zip Code State Transaction ID: 4BD3B5BD515FC6612B8C OH Oakwood 45409-2344 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Sales Leader State Farm Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ramsey, Russ, , , Date of Receipt Mailing Address 400 Heathrow Ln 10 05 2020 City State Zip Code Transaction ID: 45C585289953D19E04EF IL Rochester 62563-8718 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) Self Employed State Farm Agent 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.** Roberts, Jody, , , Date of Receipt Mailing Address 8226 S Reed St 2020 City State Zip Code Transaction ID: 454ABBAD74FB73CEB67C CO Littleton 80128-5672 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 362.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

31 FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c 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) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rutledge, Andy, , , Date of Receipt Mailing Address 15212 W Iliff Ave 2020 City Zip Code State Transaction ID: 4EADAF9BBFDF98A0799C CO Lakewood 80228-6441 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) State Farm Sales Leader 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.** Sanchez, Christina, , , Date of Receipt Mailing Address 41764 Corte Lara 10 2020 City State Zip Code Transaction ID : 4A7E8B5B2910310E624F CA Temecula 92592-6314 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) State Farm Sales Leader Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Slater, Sean, , , Date of Receipt Mailing Address 5264 S Haleyville St 02 2020 City Zip Code State Transaction ID: 4E76AFDDE20F8E4D1C74 CO Aurora 80016-4273 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 416.60 Other (specify) 116.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Llee concrete cohodule(s)	F	FOR LINE NUMBER: PAGE 18 OF 31									31	
Use separate schedule(s)	(0	(check only one)										
for each category of the Detailed Summary Page		X	11a		11b		11c		12			
Dotailed Calliniary : age			13		14		15		16			17
not be sold or used by any pedress of any political committee												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Soares De Sa, Gustavo, , , Date of Receipt Mailing Address 295 3rd St 2020 Apt 5 City State Zip Code Transaction ID: 4005BC1E7C6D00556CB0 OR Lake Oswego 97034-3057 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Agent Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stolper, Brian, , , Date of Receipt Mailing Address 276 S Arlington Ave 10 80 2020 City State Zip Code Transaction ID: 4291A212735BC36EF879 IL **Elmhurst** 60126-3504 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) Self Employed State Farm Agent 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.** Tarter, Todd, , , Date of Receipt Mailing Address 1474 Newton Ave 04 2020 City State Zip Code Transaction ID: 4108879BC51B8DA25843 IL Batavia 60510-3582 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X     11a     11b     11c     12       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) State Farm Mutual Automobile Insuran	ce Compan	y Federal Political Action Cor	mmittee (State Farm Federal PAC)
Full Name of Individual (Last, First, Middle In Toole, Paul, , ,  Mailing Address 3350 N Maple St  City Canby  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Self Employed  Receipt For:  Primary General Other (specify)	State OR Occ Sta	Zip Code 97013-2113  upation (for Individual) te Farm Agent  Year-to-Date ▼  250.00	Date of Receipt  10 03 2020  Transaction ID: 460796934D185926DF0B  Amount of Each Receipt this Period  25.00  Memo Item
Full Name of Individual (Last, First, Middle In Waterman, Analene, , ,  Mailing Address 8749 Darley Rd SE  City  Aumsville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Self Employed  Receipt For:  Primary General Other (specify)	State OR Occ Sta	Zip Code 97325-9751  supation (for Individual) te Farm Agent Year-to-Date   1425.00	Date of Receipt  M M M / D D / 2020  Transaction ID : 4062A22AD3626BDD48DA  Amount of Each Receipt this Period  150.00  Memo Item
Full Name of Individual (Last, First, Middle In Webster, Lisa, , ,  Mailing Address 16112 Parkside Dr  City Parker  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) State Farm  Receipt For: Primary General Other (specify)	State CO	Zip Code 80134-9562  upation (for Individual) es Leader  Year-to-Date   333.20	Date of Receipt  10 04 2020  Transaction ID: 4F78864EB90E14525274  Amount of Each Receipt this Period  33.32  Memo Item
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	208.32
TOTAL This Period (last page this line number	only)	·····	

31 FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 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) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilkerson, Emory, , , Date of Receipt Mailing Address 190 Pointer Ridge Trl 2020 City Zip Code State Transaction ID: 496E928F005B3B1C9DFB GA Fayetteville 30214-7403 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Associate General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Williams, Russel, , , Date of Receipt Mailing Address 3015 Winkel Way 10 2020 City State Zip Code Transaction ID: 40C1BDA35704BBD8F3CD OR West Linn 97068-2165 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) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... 4352.42 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	FOR LINE (check only	one)			
		Summary Page	21b 28a	22 <b>x</b> 23 26 27 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)  State Farm Mutual Automobile Insurance Co	ompany F	ederal Political	Action Comn	nittee (State Farm Federal PAC)			
Full Name (Last, First, Middle Initial)  A. Anthony Brown For Congress				Date of Disbursement			
Mailing Address 12138 Central Ave # 671		1		10 09 2020			
Bowie	State MD	Zip Code 20721		FEC Identification Number			
Purpose of Disbursement 2020 General			011	C C00574640  Transaction ID: 8B8A1BA90A			
Candidate Name Brown, Anthony, Gregory, ,			Category/ Type	Amount of Each Disbursement this Period			
Senate	nent For: 2 Primary Other (spec	<b>✗</b> General		500.00 Memo Item			
State: MD District: 04				Wemo item			
Full Name (Last, First, Middle Initial)  B. Bergman For Congress		Date of Disbursement					
Mailing Address 3585 Bunker Hill Rd Unit 434				10 06 2020			
Acme	State MI	Zip Code 49610		FEC Identification Number			
Purpose of Disbursement 2020 General			011	C C00614214  Transaction ID : F37B4C98E28			
Candidate Name Bergman, Jack, , ,			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For: 2 Primary Other (spec	<b>✗</b> General		500.00			
State: MI District: 01	(-			Memo Item			
Full Name (Last, First, Middle Initial)  C. Cotton For Senate, Inc.				Date of Disbursement			
Mailing Address 2226 Cottondale Ln Ste 200				10 02 2020			
City Little Rock	State AR	Zip Code 72202		FEC Identification Number			
Purpose of Disbursement 2020 General Candidate Name			011	C C00499988  Transaction ID: 864A19D536			
Cotton, Thomas, Bryant, ,  Office Sought: House Disbursem	nent For: 2	2020	Category/ Type	Amount of Each Disbursement this Period  1000.00			
x Senate	Primary Other (spec	<b>✗</b> General		Memo Item			
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).				2000.00			

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 28a					
Any information copied from such Reports and Staten or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Co	Company Federal Politica	Il Action Comn	nittee (State Farm Federal PAC)				
Full Name (Last, First, Middle Initial)  A. DeFazio for Congress  Mailing Address PO Box 1316			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Springfield Purpose of Disbursement 2020 General  Candidate Name  DeFazio, Peter, Anthony, ,  Office Sought:     House   Disbursen	State Zip Code 97477  ment For: 2020 Primary X General Other (specify) ▼	011 Category/ Type	FEC Identification Number  C C00215905  Transaction ID: 7E43A23678/ Amount of Each Disbursement this Period  500.00  Memo Item				
Full Name (Last, First, Middle Initial)  B. Huizenga For Congress  Mailing Address PO Box 254		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Zeeland Purpose of Disbursement 2020 General  Candidate Name  Huizenga, William, Patrick, ,  Office Sought:    House   Disbursen	State Zip Code 49464-1509  ment For: 2020 Primary X General Other (specify)	011 Category/ Type	FEC Identification Number  C C00459297  Transaction ID: 2765F2E2EB3  Amount of Each Disbursement this Period  500.00  Memo Item				
Full Name (Last, First, Middle Initial)  C. Mark Desaulnier For Congress  Mailing Address PO Box 6066			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Concord Purpose of Disbursement 2020 General  Candidate Name  DeSaulnier, Mark, James, ,  Office Sought:   House  Disbursen	State Zip Code CA 94524  ment For: 2020 Primary X General Other (specify) ▼	011 Category/ Type	FEC Identification Number  C C00554709  Transaction ID: 627227F8132  Amount of Each Disbursement this Period  500.00  Memo Item				
SUBTOTAL of Disbursements This Page (optional)			1500.00				
TOTAL This Period (last page this line number only)							

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 28a					
Any information copied from such Reports and Stater or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance C	Company Federal Political	Action Comm	nittee (State Farm Federal PAC)				
Full Name (Last, First, Middle Initial)  A. Moore For Congress  Mailing Address PO Box 16646			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Milwaukee Purpose of Disbursement 2020 General  Candidate Name  Moore, Gwendolynne, Sophia, ,  Office Sought:   House  Disburser	State Zip Code 53216	011 Category/ Type	FEC Identification Number  C C00397505  Transaction ID : 7316D12647C  Amount of Each Disbursement this Period  1000.00				
Senate President State: WI District: 04	Primary <b>x</b> General Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)  Moore For Congress  Date of Disbursement  Mailing Address PO Box 16646							
Milwaukee Purpose of Disbursement 2020 General Candidate Name Moore, Gwendolynne, Sophia, ,	State Zip Code WI 53216  ment For: 2020 Primary X General Other (specify)	011 Category/ Type	FEC Identification Number  C C00397505  Transaction ID : DC27C811559 Amount of Each Disbursement this Period  1000.00  Memo Item				
Full Name (Last, First, Middle Initial) C. Salud Carbajal For Congress  Mailing Address PO Box 1290			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Santa Barbara Purpose of Disbursement 2020 General Candidate Name Carbajal, Salud, O., ,	State Zip Code 93102  ment For: 2020 Primary General Other (specify)   Zip Code 93102	011 Category/ Type	FEC Identification Number  C C00576041  Transaction ID: 89B11F299B  Amount of Each Disbursement this Period  500.00  Memo Item				
SUBTOTAL of Disbursements This Page (optional)		·····	2500.00				
TOTAL This Period (last page this line number only)							

ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	21h				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Co	ompany Federal Politic	al Action Comn	nittee (State Farm Federal PAC)			
Full Name (Last, First, Middle Initial)  Texans For Senator John Cornyn II  Mailing Address PO Box 13026	nc.		Date of Disbursement  10 09 2020			
Austin Purpose of Disbursement 2020 General Candidate Name Cornyn, John, , , III Office Sought: House Disbursem	State Zip Code 78711  ment For: 2020 Primary X General Other (specify) ▼	011 Category/ Type	FEC Identification Number  C C00369033  Transaction ID: 735EB05BDD  Amount of Each Disbursement this Period  1000.00  Memo Item			
State: TX District:  Full Name (Last, First, Middle Initial)  B. Upton For All Of Us  Mailing Address PO Box 490			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Saint Joseph Purpose of Disbursement 2020 General  Candidate Name  Upton, Frederick, Stephen,,  Office Sought:    X   House   Disbursem   Senate	Saint Joseph Purpose of Disbursement 2020 General  Candidate Name Upton, Frederick, Stephen, Office Sought:    MI					
Full Name (Last, First, Middle Initial)  C.  Mailing Address			Date of Disbursement			
City  Purpose of Disbursement  Candidate Name	Category/	FEC Identification Number  C  Amount of Each Disbursement this Period				
	nent For:  Primary General  Other (specify) ▼	Type	Memo Item			
SUBTOTAL of Disbursements This Page (optional)			2000.00			
TOTAL This Period (last page this line number only)						

## 17

SCHEDULE B (FEC Form 3X)	11		E NUMBER: PAGE 25 OF 31					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(Orlean orr					
		Summary Page	21b		23 28c	26 29	27 30b	
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or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
State Farm Mutual Automobile Insurance C	ompany F	ederal Politica	I Action Com	mittee (Sta	te Farm F	Federal F	PAC)	
Full Name (Last, First, Middle Initial)				T				
A. Jason, Launey, , ,				Date of	Disburseme	ent		
AA III AAAA Qoos Dishaasad Oo				M M M	/ D D		Y   Y   Y	
Mailing Address 6005 Richwood Cir				10	13		2020	_
,	State	Zip Code		FEC Ide	ntification N	Number		
Roswell Purpose of Disbursement	GA	30076-6434			-		-	
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Office Sought: House Disburser Senate	nent For: Primary	General			_		41.66	
President	Other (spe			Пи				
State: District:	` .			Men	no Item			
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Purpose of Disbursement				C				
Candidate Name			Category/	Amount	of Each Dis	sburseme	nt this Pe	eriod
Office Sought: House Disburser	nent For:		Type					$\Box$
Senate	Primary	General			7	-	1 46	
President	Other (spec	cify)		Men	no Item			
State: District:								
Full Name (Last, First, Middle Initial)  C.				Date of	Disburseme	ent		
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Purpose of Disbursement				C .				
Candidate Name			Category/	Amount	of Each Dis	shursemei	nt this Pe	eriod
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	nent For:	Consered			7	-	1 45	
Senate   President	Primary Other (spec	☐ General		Ь				
State: District:	CC. (Open	····//		Men	no Item			
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SUBTOTAL of Disbursements This Page (optional)		·····	·······				41.66	3
TOTAL This Period (last page this line number only)							41.66	3
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	FOR LINE (check only	•
	Detailed	Summary Page	28a	28b 28c <b>x</b> 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Co				
Full Name (Last, First, Middle Initial)  A. Reardon for Oregon				Date of Disbursement
Mailing Address 12045 SE Foster Place				10 06 / 2020
Portland	State OR	Zip Code 97266		FEC Identification Number
Purpose of Disbursement Nonfederal Contribution			011	Transaction ID : 5ACBC9B68I
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen Senate President	nent For: Primary Other (spec	General cify) ▼		500.00 Memo Item
State: District:				Memo item
Full Name (Last, First, Middle Initial)  B. Committee to Elect Dennis Linthicu		Date of Disbursement		
Mailing Address 20990 Hwy 140 E				10 09 2020
City Dairy Purpose of Disbursement Nonfederal Contribution	State OR	Zip Code 97625	011	FEC Identification Number
Candidate Name			Category/ Type	Transaction ID: DF98D6F278€ Amount of Each Disbursement this Period
	nent For: Primary Other (spec	General cify)		1000.00 Memo Item
Full Name (Last, First, Middle Initial)  C. Committee to Elect Janelle Bynum				Date of Disbursement
Mailing Address 3321 SE 20th Avenue				10 06 2020
Portland	State OR	Zip Code 97202		FEC Identification Number
Purpose of Disbursement Nonfederal Contribution  Candidate Name			011 Category/ Type	Transaction ID: EE4CE2F242 Amount of Each Disbursement this Period
Office Sought: House Disbursen Senate President	Primary	General	1,400	1500.00
State: District:	Other (spec	∪iiy <i>)</i> ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)				3000.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate scheduler for each category of the	(CILCON OIL)	/ one)
	Detailed Summary Page		22 23 26 27 28b 28c <b>x</b> 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance (	Company Federal Politic	cal Action Comr	mittee (State Farm Federal PAC)
Full Name (Last, First, Middle Initial)  A. Committee to Elect John Lively for S	State Representative	, Dist. 12	Date of Disbursement
Mailing Address 1186 West D Street			10 06 2020
City Springfield	State Zip Code 97477		FEC Identification Number
Purpose of Disbursement Nonfederal Contribution Candidate Name		011	Transaction ID : 010B1033EA
	ement For:	Category/ Type	Amount of Each Disbursement this Period 500.00
Senate President	Primary General Other (specify) ▼	I	Memo Item
State: District:  Full Name (Last, First, Middle Initial)			
B. Friends of Bill Hansell		Date of Disbursement	
Mailing Address 101 Southeast 3rd Street			10 09 2020
City Pendleton	State Zip Code 97801		FEC Identification Number
Purpose of Disbursement Nonfederal Contribution		011	C Transaction ID : 7F093C26B60
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	I	1000.00  Memo Item
State: District:	-		Welle tell
Full Name (Last, First, Middle Initial)  C. Friends of Chuck Thomsen			Date of Disbursement
Mailing Address 1595 Eastside Road			10 09 2020
City Hood River	State Zip Code OR 97031		FEC Identification Number
Purpose of Disbursement Nonfederal Contribution  Candidate Name		011	Transaction ID : C2D5AAAAA Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:	Category/ Type	1500.00
Senate President	Primary General Other (specify) ▼	l	Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00
TOTAL This Period (last page this line number only	y)	·····•	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedul	e(s) (check only	21h 22 23 26 27				
	Detailed Summary Pa	ge28a	28b 28c <b>x</b> 29 30b				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance C							
Full Name (Last, First, Middle Initial)  A. Friends of Dallas Heard	Date of Disbursement						
Mailing Address 89286 Cranberry Lane	10 09 2020						
Bandon	State Zip Code 97411	_	FEC Identification Number				
Purpose of Disbursement Nonfederal Contribution  Candidate Name  Octoory/			Transaction ID : 2BC8452D1F				
Office Sought: Disbursement For:			Amount of Each Disbursement this Period				
Senate President State: District:	Primary Gener Other (specify) ▼	al	Memo Item				
Full Name (Last, First, Middle Initial)  B. Friends of Elizabeth Steiner Haywa	ard		Date of Disbursement				
Mailing Address 1410 NW Kearny St. #1119			10 09 2020				
Portland							
Purpose of Disbursement Nonfederal Contribution	011	C Transaction ID : 560198C9F14					
Candidate Name	Amount of Each Disbursement this Period						
Senate	ment For:  Primary General  Other (specify)	al	1500.00				
State: President District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)  Friends of Julie Fahey			Date of Disbursement				
Mailing Address 1831 Todd St			10 06 2020				
Eugene Purpose of Disbursement	State Zip Code OR 97405		FEC Identification Number				
Nonfederal Contribution  Candidate Name		011 Category/ Type	Transaction ID : 488BEBDEC  Amount of Each Disbursement this Period				
Office Sought: House Disburser Senate President State: District:	ment For: Primary Gener Other (specify) ▼		500.00 Memo Item				
State. District.							
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	3000.00				
TOTAL This Period (last page this line number only)	)		1				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each of	Use separate schedule(s) for each category of the Detailed Summary Page						
	Detailed S			28b 28c <b>x</b> 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance C								
Full Name (Last, First, Middle Initial)  A. Friends of Paul Evans				Date of Disbursement  10 06 2020				
Mailing Address 1320 Edgewater Street NW Suite 120								
Salem	State OR	Zip Code 97304		FEC Identification Number				
Purpose of Disbursement Nonfederal Contribution  Candidate Name				Transaction ID : 905EE8838E€				
Category/ Type  Office Sought: House Disbursement For:				Amount of Each Disbursement this Period 500.00				
Senate President	Primary General Other (specify) ▼			Memo Item				
State: District:				П				
Full Name (Last, First, Middle Initial)  Friends of Tina Kotek				Date of Disbursement				
Mailing Address 7930 N Wabash Ave				10 06 2020				
City Portland	State OR	Zip Code 97217		FEC Identification Number				
Purpose of Disbursement			011	C AFPLOSEDED				
Candidate Name  Category/ Type				Transaction ID: 15B1265DDB: Amount of Each Disbursement this Perio				
Senate	rsement For: Primary General			1000.00				
State: President District:	Other (specify)			Memo Item				
Full Name (Last, First, Middle Initial)  - Hayden for Oregon				Date of Disbursement				
Mailing Address P.O. Box 459				10 08 2020				
City Lowell Purpose of Disbursement	State OR	Zip Code 97452		FEC Identification Number				
Nonfederal Contribution  Candidate Name			011 Category/	Transaction ID : 9B5B3CD43E Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate	ment For: Primary	General	Туре	500.00				
State: President State:	Other (specify) ▼			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	(Glicek Grily Grie)				
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Co	ompany Federal Politica	al Action Comr	nittee (State Farm Federal PAC)			
Full Name (Last, First, Middle Initial)  4. Lynn Findley for State Senate	Date of Disbursement					
Mailing Address 230 N Oregon St			10 09 2020			
Ontario	State Zip Code OR 97914		FEC Identification Number			
Purpose of Disbursement Nonfederal Contribution Candidate Name	Transaction ID : A01382F6385 Amount of Each Disbursement this Period					
Office Sought:    House   Disbursem	1000.00 Memo Item					
Full Name (Last, First, Middle Initial)  3. Paul Holvey for State Representativ  Mailing Address P.O. Box 51416	ive		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Eugene Purpose of Disbursement Nonfederal Contribution	011	FEC Identification Number				
Candidate Name	Transaction ID: 90CC2BAEA8 Amount of Each Disbursement this Per					
	nent For: Primary General Other (specify)		500.00  Memo Item			
Full Name (Last, First, Middle Initial)  Team BSW (Barbara Smith Warner	r)		Date of Disbursement			
Mailing Address 3321 SE 20th Ave.			10 06 2020			
,	State Zip Code OR 97202	011	FEC Identification Number			
Candidate Name		Category/ Type	Transaction ID: A2D071D833  Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼	.,,,,,	1000.00  Memo Item			
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)	U		FOR LINE		PAGE 31 OF 31						
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(oricon or	· — ·		7 oc	7 07				
		Summary Page	211		23 28c <b>x</b>	26 27 29 30b					
Any information copied from such Departs and Ctate	monto mo:	not be sald as									
Any information copied from such Reports and State or for commercial purposes, other than using the nar											
NAME OF COMMITTEE (In Full)											
State Farm Mutual Automobile Insurance C	Company F	ederal Politica	I Action Com	nmittee (Sta	te Farm F	ederal F	PAC)				
/											
Full Name (Last, First, Middle Initial)				Data of	Disburseme	unt.					
A. Wilde for Oregon											
Mailing Address 3390 Potter St.				10	06		2020	ſ			
,	State	Zip Code		FEC Identification Number							
Eugene Purpose of Disbursement	OR	97405									
Nonfederal Contribution					C						
Candidate Name			Category/		nsaction ID of Each Dis			eriod			
			Type	Airiount	C. Luon Dis	,5 GI 5 GI 11 GI		-			
	ment For:				500.00						
Senate	-										
State: District:	Other (spe				Memo Item						
Full Name (Last, First, Middle Initial)				<del>                                     </del>							
B.				Date of	Disburseme	ent					
<b>-</b> .					M M / D D / Y Y Y Y						
Mailing Address											
-		T=:									
City	State	Zip Code		FEC Identification Number							
Purpose of Disbursement			C								
				<u> </u>							
Candidate Name Category/			Amount of Each Disbursement this Period								
Туре											
Office Sought: House Disbursement For:					7	7	1 40				
Senate Primary General  President Other (specify)											
State: District:	Caron (apoony)			Memo Item							
Full Name (Last, First, Middle Initial)											
C.				Date of	Disburseme	ent					
				M M / D D / Y Y Y Y							
Mailing Address								_			
City	State	Zip Code		EEO 13-	ntification N	lumba-					
·				FEC Ide	ntification N	iuiiiDef	-				
Purpose of Disbursement				C							
Candidate Name											
Sandidate Hairie			Category/ Type	Amount	of Each Dis	sbursemer	nt this Pe	əriod			
Office Sought: House Disburse	ment For:		1,700	1							
Senate Primary General					7		- 45				
President	Other (specify) ▼			Memo Item							
State: District:											
							500.00				
SUBTOTAL of Disbursements This Page (optional)			·····•			7	500.00	,			
TOTAL This Period (last page this line number only	)						14000.00	0			
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