Image# 202201279475225925					PAGE 1 / 21
FEC AN	EPORT OF F ND DISBURS Other Than An Author	SEMENT	s	Office U	se Only
1. NAME OF TYP COMMITTEE (in full)	PE OR PRINT V	Example: If typ	ing, type	2FE4M5	
	71 E BROAD ST				
ADDRESS (number and street)					
than previously reported. (ACC)				H 43215	5
2. FEC IDENTIFICATION NUMB		<b>A</b>	STA	TE 🔺	ZIP CODE
C C00336834	3. IS RE		NEW (N) <b>OR</b>	AMENDED (A)	
<ul> <li>4. TYPE OF REPORT (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> <li>July 15 Quarterly Report (Q2)</li> <li>October 15 Quarterly Report (Q3)</li> <li>January 31 Year-End Report (YE)</li> <li>July 31 Mid-Year Report (Non-election Year Only) (MY)</li> <li>Termination Report (TER)</li> </ul>	Report Due On: Mar 2	General (30	(12C) <b>X</b>	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) 2021 Runoff (30R)	In the State of Special (30S)
Type or Print Name of Treasurer	2021 eport and to the best of moore, Marchelle, , ,	through		13 20; Forrect and comple	te.
NOTE: Submission of false, erroneous Office Use Only	, or incomplete information	may subject the per	rson signing this R	FEC	es of 52 U.S.C. § 3010 FORM 3X Rev. 05/2016

01/27/2022 17 : 00

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### ENCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND) D D Y Y M M D D M M YY 07 01 2021 10 13 2021 Report Covering the Period: From: To:

		COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6.	(a) Cash on Hand January 1, 2021		33289.30			
	(b) Cash on Hand at Beginning of Reporting Period	40810.30				
	(c) Total Receipts (from Line 19)	9370.00	24560.00			
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	50180.30	57849.30			
7.	Total Disbursements (from Line 31)	14621.00	22290.00			
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	35559.30	35559.30			
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Report Covering the Period: From: 07	/ D D / Y Y Y Y 01 2021	To: 10 / 13 / 2021
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:         <ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> </ul> </li> </ol>		
(i) Itemized (use Schedule A)	9330.00	17810.00
(ii) Unitemized (iii) TOTAL (add	40.00	6750.00
Lines 11(a)(i) and (ii)	9370.00	24560.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
<ul> <li>(d) Total Contributions (add Lines</li> <li>11(a)(iii), (b), and (c)) (Carry</li> <li>Totals to Line 33, page 5)</li> </ul>	9370.00	24560.00
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
8. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other Political Committees 7. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.) 7. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
D. Total Receipts (add Lines 11(d),           12, 13, 14, 15, 16, 17, and 18(c))	9370.00	24560.00
<ol> <li>Total Federal Receipts (subtract Line 18(c) from Line 19)</li> </ol>	9370.00	24560.00

-7

(subtract Line 18(c) from Line 19).....▶

-9

Page 3

I

### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	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		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	117.00	286.00		
<ul> <li>(c) Total Operating Expenditures</li> <li>(add 21(a)(i), (a)(ii), and (b))</li> </ul>	117.00	286.00		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees				
(c) Other Political Committees	0.00	0.00		
<ul><li>(such as PACs)</li><li>(d) Total Contribution Refunds</li></ul>	0.00	0.00		
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	14504.00	22004.00		
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity	20))			
(from Schedule H6) (i) Federal Share	0.00	0.00		
	0.00	0.00		
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid</li></ul>	0.00	0.00		
<ul><li>Entirely With Federal Funds</li><li>(c) Total Federal Election Activity (add</li></ul>	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))	14621.00	22290.00		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	14621.00	22290.00		

L

### DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures			
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	9370.00	24560.00	
<ol> <li>Total Contribution Refunds         (from Line 28(d))     </li> </ol>	0.00	0.00	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9370.00	24560.00	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	117.00	286.00	
<ol> <li>Offsets to Operating Expenditures (from Line 15, page 3)</li> </ol>	0.00	0.00	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	117.00	286.00	

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

21

			Use separate schedule(s)	(check only one)				
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17				
Any or f	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions				
<u> </u>	NAME OF COMMITTEE (In Full)							
			RISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND)				
	Full Name of Individual (Last, First, Middle Initi Agan, Michael, J., ,	al) or Full O	Organization Name	Date of Receipt				
· · · ·	Mailing Address 5658 Tynecastle Loop			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	10 09 2021				
_	Dublin	OH	43016	Transaction ID : SA11AI.4581           Amount of Each Receipt this Period				
	FEC ID number of contributing	С		320.00				
1	federal political committee.	U						
Ī	Name of Employer (for Individual)		upation (for Individual)	Memo Item				
	Encova Service Corp	Pres	sident MLIC	\$40.00/biweekly				
l	Receipt For:	Aggregate	Year-to-Date <b>V</b>	_				
	Other (specify)		840.00					
			-gp 4p 40.					
D	Full Name of Individual (Last, First, Middle Initia Ashcraft, David, , ,	al) or Full O	Organization Name	Date of Receipt				
	Mailing Address 1323 Ada Lane							
	1323 Ada Lane			10 09 2021				
(	City	State	Zip Code	Transaction ID : SA11AI.4565				
-	Naperville	IL	60540	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer (for Individual) Encova Service Corp	Occi VP	cupation (for Individual)	Memo Item \$25.00/biweekly				
Ī	Receipt For:	Aggregate	Year-to-Date V					
	Primary General		E2E 00					
	Other (specify) V		, 525.00					
	Full Name of Individual (Last, First, Middle Initia Begley, Jolie, , ,	al) or Full O	Organization Name	Date of Receipt				
-	Mailing Address 2645 McVey Blvd West			M M / D D / Y Y Y Y				
	City	State	Zip Code	10 09 2021 Transaction ID : SA11AI.4575				
	Columbus	OH	43235	Amount of Each Receipt this Period				
-	FEC ID number of contributing							
1	federal political committee.	C		120.00				
-	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	Encova Service Corp	VP II	Infrastructure Services	\$15.00/biweekly				
I	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify)		315.00					
รเ	JBTOTAL of Receipts This Page (optional)		•••••	640.00				
Тс	OTAL This Period (last page this line number o	nly)	••••••					

## SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

21

			Use separate schedule(s)	(check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★     11a     11b     11c     12       13     14     15     16     17				
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any address of any political committ	person for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
$\left \right\rangle$			RISTS MUTUAL INS	JRANCE COMPANY CIVIC FUND)				
Α.	Full Name of Individual (Last, First, Middle Initi Benintendi, Jeff, , ,	ial) or Full O	Drganization Name	Date of Receipt				
/	Mailing Address 5658 Tynecastle Loop			10 09 2021				
	City	State	Zip Code	Transaction ID : SA11AI.4572				
	Dublin	OH	43016	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		800.00				
	Name of Employer (for Individual)	Occi	cupation (for Individual)	Memo Item				
	Encova Service Corp	EVF	1 ( )	\$100.00/biweekly				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General							
	Other (specify) <b>v</b>	L	2100.00					
R	Full Name of Individual (Last, First, Middle Initi Bills, Alissa, R, ,	ial) or Full O	Drganization Name	Date of Receipt				
υ.	Mailing Address 5300 Snider Loop			M M / D D / Y Y Y Y				
		01-1-	7	10 09 2021				
	City New Albany	State OH	Zip Code 43054	Transaction ID : SA11AI.4555				
	· · · ·		43034	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		120.00				
	Name of Employer (for Individual) Encova Service Corp		cupation (for Individual) derwriter	Memo Item \$15.00/biweekly				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General	33 - 3						
	Other (specify) <b>v</b>	L	, 315.00					
С.	Full Name of Individual (Last, First, Middle Initi Binau, Ryan, G, ,	ial) or Full O	Drganization Name	Date of Receipt				
•	Mailing Address 2979 Plymouth Ct			10 09 2021				
	City	State	Zip Code	Transaction ID : SA11AI.4584				
	Powell	OH	43065	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		С		80.00				
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item				
	Encova Service Corp	VP a	and Business Director	\$10.00/biweekly				
	Receipt For:	Aggregate	Year-to-Date <b>V</b>					
	Other (specify)		210.00					
⊢	UBTOTAL of Receipts This Page (optional)			► 1000.00				
1	<b>OTAL</b> This Period (last page this line number of	only)						

## SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

21

			Use separate schedule(s)	(check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)		address of any pointed commute					
$\left \right\rangle$			RISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND)				
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name					
Α.	Brock, Thomas, J., , Mailing Address 60 E. Spring St. #326			Date of Receipt				
	Maining Address 60 E. Spring St. #326			10 09 2021				
	City	State	Zip Code	Transaction ID : SA11AI.4590				
	Columbus	OH	43215	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		120.00				
	federal political committee.							
	Name of Employer (for Individual)		upation (for Individual)	Memo Item				
	Motorists Mutual Ins Co	Asst	st. VP	\$15.00/biweekly				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_				
	Other (specify) ▼		315.00					
			April April April					
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name					
В.	Campbell, Grady, , Mr.,			Date of Receipt				
	Mailing Address 5760 Whispering Trail			10 09 2021				
	City	State	Zip Code	Transaction ID : SA11AI.4567				
	Galena	OH	43021	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		400.00				
	Name of Employer (for Individual) Encova Service Corp		cupation (for Individual) VP Marketing Services & PL	Memo Item \$50.00/biweekly				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General							
	Other (specify) <b>v</b>		, 1050.00					
C.	Full Name of Individual (Last, First, Middle Initi Craig, Camille, , Mrs.,	al) or Full O	Organization Name	Date of Receipt				
	Mailing Address 4282 Hunts Drive			10 09 2021				
	City	State	Zip Code	Transaction ID : SA11AI.4559				
	Gahanna	OH	43230	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		120.00				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	Motorists Life Ins. Co.	Assi	istant Vice President Life Adm.	\$15.00/biweekly				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify)		315.00					
F	UBTOTAL of Receipts This Page (optional)			640.00				
т	OTAL This Period (last page this line number of	nly)	••••••					

## SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

21

IT.	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) ENCOVA CIVIC FUND (OF THE	МОТО	RISTS MUTUAL INSUF	RANCE COMPANY CIVIC FUND)				
Α.	Full Name of Individual (Last, First, Middle Initia Eppley, Jason, M, ,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 7918 Brianna Drive			10 09 2021				
	City Blacklick	State OH	Zip Code 43003	Transaction ID : SA11AI.4569 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		120.00				
	Name of Employer (for Individual) Encova Service Corp		cupation (for Individual) derwriting Strategist	Memo Item \$15.00/biweekly				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00					
В.	Full Name of Individual (Last, First, Middle Initia Fallen, Hope, , , Mailing Address 2642 Blue Lick Rd.	al) or Full C	Drganization Name	Date of Receipt				
	City	State	Zip Code	10 09 2021				
	Winfield	WV	25213	Transaction ID : SA11AI.4568 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer (for Individual) Encova Service Corp	Occ AV	cupation (for Individual) P	Memo Item \$25.00/biweekly				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P Year-to-Date ▼ 525.00					
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 537 Courtright Court			10 / D D / Y Y Y Y 2021				
	City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.4570 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.							
Name of Employer (for Individual) Encova Service Corp			cupation (for Individual) P Strategic Business Administration	Memo Item \$15.00/biweekly				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 315.00					
s	UBTOTAL of Receipts This Page (optional)		▶	440.00				

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

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

21

175				Use separate schedule(s)	(cł	(check only one)						
116	EMIZED RECEIPTS			for each category of the Detailed Summary Page		<b>×</b> 11a 13		11b 14	11c	12		17
	v information copied from such Reports and Sta for commercial purposes, other than using the r					for the		pose o	f solicitin	g contri	butior	ns
	NAME OF COMMITTEE (In Full) ENCOVA CIVIC FUND (OF THE	MOTO					$\sim$					יטי
	ENCOVACIVIC FOIND (OF THE			STS WOTOAL INSU	ΠAI	NCE					FUI	ND)
	Full Name of Individual (Last, First, Middle Initia Feldner, Cynthia, , ,	l) or Full O	rga	nization Name		Date c	of Re	ceint				
	Mailing Address 5367 Stotlz Ave					M N		D		( Y Y		1
	0.4	01-1-1		Zia Ocala		10		09		2021	1	
	City Groveport	State OH		Zip Code 43125					<b>SA11A</b> Receipt t		od	
-	FEC ID number of contributing	С									20.00	
1	federal political committee.	C	-			<u></u>	-	-		12	20.00	<u>.                                     </u>
Ī	Name of Employer (for Individual)	Оссі	upa	tion (for Individual)		N	lemo	b Item				
	Encova Service Corp	Acco	oun	tant		\$15.00/	biwe	ekly				
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Primary General Other (specify) ▼			315.00								
			7									
	Full Name of Individual (Last, First, Middle Initia Flaherty, Thomas, , ,	l) or Full O	rga	nization Name		Data	f Da	agint				
	Mailing Address 109 Capital St. Suite 1100					Date c		D		Ý	V	
	The Capital St. Suite 1100							20		2021		
	City	State		Zip Code		Trans	sacti	ion ID :	SA11AI	.4591		<u> </u>
-	Charleston	WV		25301	_	Amour	nt of	Each I	Receipt t	his Peri	od	
	FEC ID number of contributing federal political committee.	С						- <b>J</b> -		25	50.00	
	Name of Employer (for Individual) Encova Board of Directors	Occi Dire		tion (for Individual) r		N Payroll I		ttem tion				
Ī	Receipt For:	Aggregate	Aggregate Year-to-Date ▼ 500.00									
	Primary General Other (specify) ▼											
		L	,									
	Full Name of Individual (Last, First, Middle Initia Fullenkamp, Joseph, , ,	l) or Full O	rga	nization Name		Date c	of Re	eceipt				
	Mailing Address 3123 Summit Street				$\neg$	M N		D	D / 1	( Y Y	Y Y	1.1
	~;					10		09		2021		
	City Columbus	State OH		Zip Code 43202	-			-	SA11A		od	
-	FEC ID number of contributing		-			Amour			Receipt t	nis ren	ou	-
	federal political committee.	С				<u>L</u> .		y		12	20.00	_
Ī	Name of Employer (for Individual)	Осси	upa	tion (for Individual)		N	lemo	o Item				
	Encova Service Corp	VP L	Und	erwriting		\$15.00/	biwe	ekly				
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Other (specify)		-	315.00								
Г						_	-				0.00	_
รเ	JBTOTAL of Receipts This Page (optional)			•	-	÷	÷	9		49	90.00	4
т	OTAL This Period (last page this line number or	ıly)		••••••				-			-	

FEC Schedule A (Form 3X) Rev. 06/2016

## SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 11 OF

21

			Use separate schedule(s)	(check only one)				
ITEMIZED F			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12 16	17
			ay not be sold or used by any pendotes of any political committee	erson for the p	ourpose of s	soliciting	contribut	tions
	MMITTEE (In Full) CIVIC FUND (OF TH	E MOTOI	RISTS MUTUAL INSU	RANCE C	OMPAN	1Y CIV	/IC Fl	JND)
Full Name of <b>A.</b> Gandee, Ste	Individual (Last, First, Middle Ini eve, , ,	tial) or Full O	organization Name	Date of	Receipt			
	96 Pleasant Colony Dr			10 <sup>M</sup>	/ D D 09	/ Y	y y 2021	Y
City Evans		State WV	Zip Code 25241		action ID : S of Each Re			
FEC ID number federal politica	er of contributing I committee.	С			-7		120.0	00
Encova Servic	loyer (for Individual) e Corp		upation (for Individual) and Business Director	Me \$15.00/bir	mo Item weekly			
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 315.00					
B. Gilmore, A	Individual (Last, First, Middle Ini my, , , <sup>ss</sup> 3500 Leap Rd.	tial) or Full O	rganization Name	Date of	/ D D	/ Y	Y Y	Y
City Hilliard		State	Zip Code		09 Inction ID : S			
	er of contributing I committee.	C	43026	Amount	of Each Re	ceipt thi	s Period 200.0	00
Name of Emp Encova Service	loyer (for Individual) e Corp	Occi VP	upation (for Individual)	Me \$25.00/biv	mo Item weekly			
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 525.00					
Full Name of C. Griffin, Are	Individual (Last, First, Middle Ini chie, , ,	tial) or Full O	organization Name	Date of	Receipt			
Mailing Addres	6845 Temperance Point Place	9		07	/ D D D 20	/ Y	y y 2021	Y
City Westerville		State OH	Zip Code 43082		of Each Re			
FEC ID number federal politica	er of contributing I committee.	С			9	9	250.0	00
Motorists Mutual Ins. Co.		Occu Direc	upation (for Individual) ctor	Payroll D	mo Item eduction			
Receipt For:       Aggregate         Primary       General         Other (specify)			Year-to-Date ▼ 500.00					
SUBTOTAL of F	Receipts This Page (optional)				9		570.0	00
TOTAL This Per	riod (last page this line number	only)	••••••					

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 12 OF

21

		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Re or for commercial purposes, other that	ports and Statements ma n using the name and a	ay not be sold or used by any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	-						
	(OF THE MOTO	RISTS MUTUAL INSU	JRANCE COMPANY CIVIC FUND)				
Full Name of Individual (Last, First Guanciale, Dino, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 4819 St. Andrews	Circle		10 09 2021				
City Westerville	State OH	Zip Code 43082	Transaction ID : SA11AI.4566 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		120.00				
Name of Employer (for Individual) Motorists Mutual Ins Co.		upation (for Individual) t. VP	Memo Item \$15.00/biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	]				
Full Name of Individual (Last, First B. Hall, Marc S., , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 5999 Lane Road			10 09 2021				
City Centerburg	State OH	Zip Code 43011	Transaction ID : SA11AI.4577 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		120.00				
Name of Employer (for Individual) Motorists Mutual Ins. Company		upation (for Individual) ist. V. P.	Memo Item \$15.00/biweekly				
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		315.00	]				
Full Name of Individual (Last, First C. Henderson, Thomas, J.,		rganization Name	Date of Receipt				
Mailing Address 9725 Wagonwood	Drive		M M / D D / Y Y Y Y 10 09 2021				
City Pickerington	State OH	Zip Code 43147	Transaction ID : SA11AI.4571           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		120.00				
		upation (for Individual) Claims Operations	Memo Item \$15.00/biweekly				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 315.00	]				
SUBTOTAL of Receipts This Page (	optional)		360.00				
TOTAL This Period (last page this li	ne number only)						

FEC Schedule A (Form 3X) Rev. 06/2016

## SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

21

			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma	I ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$\left \right\rangle$		Ε ΜΟΤΟΙ	RISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND)						
Α.	Full Name of Individual (Last, First, Middle Initi Howat, James, Christopher, ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 250 Daniel Burnham Sq Unit 5	04		M = M / D D / Y = Y = Y						
	City	State	Zin Codo	10 09 2021						
	City Columbus	OH	Zip Code 43215	Transaction ID : SA11AI.4560 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		400.00						
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item						
	Motorists Insurance	EVF	P	\$50.00/biweekly						
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General		1050.00	1						
	Other (specify) <b>v</b>	<u> </u>	1050.00	1						
	Full Name of Individual (Last, First, Middle Initi Jeffers, Dan, E., Mr.,	al) or Full O	Drganization Name	Data of Dessint						
D.	Mailing Address 6401 Rossmore Lane			Date of Receipt						
	Maining Address 6401 Rossmore Lane			10 09 2021						
	City	State	Zip Code	Transaction ID : SA11AI.4564						
	Canal Winchester	OH	43110	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		120.00						
	Name of Employer (for Individual) Motorists Mutual Ins Company		cupation (for Individual) sist. V. P.	Memo Item \$15.00/biweekly						
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General Other (specify) ▼		, 315.00	]						
<u> </u>	Full Name of Individual (Last, First, Middle Initi Kaufman, David L., , ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 7925 Greenside Lane			07 20 2021						
	City	State	Zip Code	Transaction ID : SA11AI.4594						
	Worthington	OH	43235	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		500.00						
	Name of Employer (for Individual)	Оссі	cupation (for Individual)	Memo Item						
			cutive VP & COO	Payroll Deduction						
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)	]								
⊢	<b>CUBTOTAL</b> of Receipts This Page (optional)			1020.00						
1'	The most chool (last page this line humber t	/····y/·····	·····							

FEC Schedule A (Form 3X) Rev. 06/2016

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

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PAGE 14 OF

21

			Use separate schedule(s)	(check only	(check only one)					
ITEMIZED REG	6 EIF I 3		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c 15	12	17		
			y not be sold or used by any political committee	erson for the	purpose of	soliciting	contribut	tions		
		MOTOR	RISTS MUTUAL INSU	RANCE C	OMPA	VY CI	/IC Fl	JND)		
	vidual (Last, First, Middle Initia	I) or Full Or	ganization Name							
A. Kessler, John C				Date of	Receipt					
Mailing Address 3	3910 Caswell Road			10 <sup>M</sup>	/ D D 09	/ Y	y y 2021	Y		
City Johnstown		State OH	Zip Code 43031		action ID : 3					
Johnstown			43031	Amount	of Each Re	eceipt this	s Period			
FEC ID number o federal political co	0	С					160.0	00		
Name of Employe	r (for Individual)	Occu	pation (for Individual)	Me	emo Item					
Motorists Mutual Ir	ns. Co.	VP a	nd CIO	\$20.00/b	weekly					
Receipt For:		Aggregate Y	Year-to-Date ▼							
Primary	General		400.00							
Other (speci	ity) 🔻		420.00							
Full Name of Indiv	vidual (Last, First, Middle Initia	I) or Full Or	ganization Name							
B. King, Teresa				Date of	Receipt					
	139 Tidewater Court			10						
City		State	Zip Code	Trans	action ID : S	SA11AI.4	588			
Westerville		OH	43082	Amount	of Each Re	eceipt this	s Period			
FEC ID number o federal political co	0	С			- 40-		320.0	00		
Name of Employe Motorists Mutual In			pation (for Individual) st. V. P.	Me \$40.00/bi	emo Item weekly					
Receipt For:		Aggregate Y	Year-to-Date ▼							
Primary	General									
Other (speci	ify) ▼		, 840.00							
Full Name of Indiv C. Marshall, Bra	vidual (Last, First, Middle Initia andon, , ,	I) or Full Org	ganization Name	Date of	Receipt					
Mailing Address 7	74 Cassidy Dr.			10 <sup>M</sup>	/ D D 09	/ Y	y 2021	Y		
City		State	Zip Code	Trans	Transaction ID : SA11AI.4558					
Winfield		WV	25213	Amount	of Each Re	eceipt this	s Period			
FEC ID number o federal political co	5	С			, ,		200.0	00		
Name of Employe	r (for Individual)	Occu	pation (for Individual)	Me	emo Item					
Brickstreet Insurance			[·····/	\$25.00/b	iweekly					
			Year-to-Date ▼							
Primary	General		E 2E 00							
Other (speci	ity)		525.00							
SUBTOTAL of Rece	eipts This Page (optional)		······ •		- <u>-</u>	9	680.0	00		
TOTAL This Period	(last page this line number on	ıly)				-				

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

21

Detailed Summary Page       11a       11b       11c       12         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)         ENCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Use separate schedule(s)	(check only one)					
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliditing contributions from such committee.         NAME OF COMMITTEE (in Full)         FUCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. McGee, Bill         Mailing Address 48 E, Frankton St.         City         Calumbus         Per of nonvicual (Last, First, Middle Initial) or Full Organization Name         Name of Employer (for Individual)         Motores, Bin Individual (Last, First, Middle Initial) or Full Organization Name         Name of Employer (for Individual)         Motores, Marchelle,         Mailing Address 2717 Gatewood Rd.         City         City         Columbus         Per ID number of contributing federal political committee.         Date of Receipt for:         Primary       General         Other (specify) Image: State of Columbus         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         Columbus       Other (specify) Image: State of Columbus         Full Name of Individual (Last, First, Middle Initial) or Columbus         Other (specify) Image: State of Columbus       Other (specify)         Full Name of Indiv	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page						
ENCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. McGee, Bill,         Mailing Address 48 E. Frankfort St.         City         Columbus         FEC ID number of contributing tederal political committee.         Name of Employer (for Individual)         Matting Address 2717 Gatewood Rd.         City         Other (specify) $\checkmark$ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. Moore, Marchelle,         Mailing Address 2717 Gatewood Rd.         City         Columbus         Period         State         Other (specify) $\checkmark$ State         Other (specify) $\checkmark$ State         City         Columbus         Name of Employer (for Individual)         Mating Address 2717 Gatewood Rd.         City         City         Columbus         Name of Employer (for Individual)         Moting Address 11176 Coontz Rd         City       General         Other (specify) $\checkmark$ State         City       Other (specify) $\checkmark$				erson for the purpose of soliciting contributions					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         A. McGee, Bill, , ,       Maling Address 48 E, Frankfort St.       Image: Control of Contributing federal political committee.       Date of Receipt         City       Columbus       OH       43206       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Countous       OH       320.00         Name of Employer (for Individual)       SVP       SVP       S40.00         Wating Address 2717 Gatewood Rd.       SVP       State       Zip Code         City       General       City       State       Zip Code         City       General       City       State       Zip Code         Maling Address 2717 Gatewood Rd.       City       State       Zip Code         City       Golumbus       OH       43219       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Oher (specify) ♥       State       Zip Code         Name of Employer (for Individual)       Occupation (for Individual)       Occupation Name       S40.00       S40.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       S40.00       S40.00       S40.00         Full Name of Indi									
A.       McGee, Bill, , ,         Mailing Address 48 E. Franktort St.       Integration of the state of the sta	ENCOVA CIVIC FUND (OF THE PROOF OF THE PROOF PROF PR	HE MOTO	RISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND)					
Mailing Address 48 E, Frankfort St.       City       State       Zip Code         Columbus       OH       43206       Transaction ID: SA11AL4557         Amount of Each Receipt this Period       SVP       State       320.00         Receipt For:       Opmary       General       Occupation (for Individual)         Other (specify) ▼       Aggregate Year-to-Date ▼       Fdi Name of Encloser (for Individual)         Mailing Address 2717 Gatewood Rd.       To 99 / 2021         City       State       Zip Code         Columbus       Other (specify) ▼       Date of Receipt         Receipt For:       Other (specify) ▼       C         Mailing Address 2717 Gatewood Rd.       C       Transaction ID: SA11AL4576         Columbus       Oth       43219       Aggregate Year-to-Date ▼         FEC ID number of contributing federal political committee.       C       Transaction ID: SA11AL4576         Name of Employer (for Individual)       Chiel Legal Officiar       S40.00       Memo Item         S40.00       Chiel Legal Officiar       S40.00       S40.00       S40.00         FEC ID number of contributing federal political committee.       Quite that S457       Amount of Each Receipt II       Transaction ID: SA11AL4576         City       Other (specify) ▼       Gene	Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name						
City       State       Zip Code       Transaction ID : SA11AL4557         Amount of Each Receipt His Period       C       Aggregate Year-to-Date ▼       Memo Item         State       SVP       State       C         Maining Address 2717 Gatewood Rd.       C       C       Transaction ID : SA11AL4578.         Mailing Address 2717 Gatewood Rd.       C       C       Transaction ID : SA11AL4578.         Mailing Address 2717 Gatewood Rd.       C       C       Transaction ID : SA11AL4578.         Mailing Address 2717 Gatewood Rd.       C       C       Transaction ID : SA11AL4578.         Mailing Address 2717 Gatewood Rd.       C       C       C         City       State       Zip Code       Transaction ID : SA11AL4578.         Mailing Address 2717 Gatewood Rd.       C       C       C         City       State       Zip Code       Transaction ID : SA11AL4578.         Moorter, Marchelle, , , .       Mailing Address 2717 Gatewood Rd.       C       C         City       State       Zip Code       C       Transaction ID : SA11AL4578.         Manue of Enployer (for Individual)       C       C       C       Memo Item         S40.000       Chie Legal Officer       B40.00       Memo Item       S40.00			-	Date of Receipt					
City       State       Zip Code         OtImbus       OH       43206         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) Motorists Insurance       Occupation (for Individual) SVP       Memo Item         Receipt For: Other (specify) ▼       Aggregate Year-to-Date ▼       B40.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Mailing Address 2717 Gatewood Rd.       C       Transaction ID : SA11AL4570         Mailing Address 2717 Gatewood Rd.       C       Transaction ID : SA11AL4570         Mailing Address 2717 Gatewood Rd.       C       Transaction ID : SA11AL4570         Mame of Employer (for Individual) Motorists Mutual Insurance Co       C       Transaction ID : SA11AL4570         Mame of Employer (for Individual) Columbus       Occupation (for Individual) Chief Legal Officer       Memo Item         Primary Other (specify) ▼       Aggregate Year-to-Date ▼       Moore Individual         City Orient       C       Aggregate Year-to-Date ▼       Date of Receipt         City Orient       State       Zip Code       Transaction ID : SA11AL4576         Amount of Each Receipt this Period       2021       Transaction ID : SA11AL4576         Mailing Address 11176 Coontz Rd       Dif Code       <	Mailing Address 48 E. Frankfort St.								
FEC ID number of contributing federal political committee.       C       320.00         Name of Employer (for Individual) Motorists Insurance       C       Memo Item         Perceipt For: Becopt For: City       Aggregate Year-to-Date ▼       Memo Item         Bill Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Mailing Address 2717 Gatewood Rd.       City       Other (specify) ▼         City       Other (specify) ▼       City         General       C       Occupation (for Individual) Chief Legal Officer       Date of Receipt         Receipt For: Primary       General       Occupation (for Individual) Chief Legal Officer       Memo Item         S40.000/biweekly       Aggregate Year-to-Date ▼       Memo Item       S40.000/biweekly         Receipt For: Primary       General       Occupation (for Individual) Chief Legal Officer       Date of Receipt         FC: ID number of contributing federal political committee.       Aggregate Year-to-Date ▼       Memo Item         S40.000       Memo Item       S40.000       Memo Item         S40.000       Aggregate Year-to-Date ▼       Memo Item         S40.000       Memo Item       S40.000       Memo Item         S40.000       Other (specify) ▼       Aggregate Year-to-Date ▼       Memo Item	City	State	Zip Code						
rederal political committee.       V       32000         Name of Employer (for Individual) Motorists Insurance       Occupation (for Individual) SVP       Memo Item         Receipt For:       0ther (specify) ▼       840.00       State         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. Moore, Marchelle, , ,       Mailing Address 2717 Gatewood Rd.       Individual (Last, First, Middle Initial) or Full Organization Name         B. Moore, Marchelle, , ,       Mailing Address 2717 Gatewood Rd.       Individual (Last, First, Middle Initial) or Full Organization Name         FC ID number of contributing federal political committee.       C       Memo Item         Name of Employer (for Individual) Chief Legal Officer       Aggregate Year-to-Date ▼       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       Memo Item       S40.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Memo Item       S40.00         C. Myles, Leslie, , ,       Mailing Address 11176 Coontz Rd       Individual       Individual         City       Orient       State       Zip Code       Individual         Orient       Columbure       Occupation (for Individual)       Individual       Individual         Full Name of Individual (Last, First, Middle Initial) or Full Organization	Columbus	OH	43206	Amount of Each Receipt this Period					
Name of Employer (for Individual)       Occupation (for Individual)       SVP         Receipt For:       Aggregate Year-to-Date ▼       Aggregate Year-to-Date ▼         Primary       General       S40.00         Bull Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Mailing Address 2717 Gatewood Rd.       0       0         City       State       Zip Code         Columbus       OH       43219         FEC ID number of contributing federal political committee.       Occupation (for Individual)         Name of Employer (for Individual)       Occupation (for Individual)         Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         Motorist Mutual Insurance Co       City       State 480,00         Full Name of Individual (Last, First, Middle Initia)) or Full Organization Name       Memo Item         C.       Myles, Lesslie, , ,       Memo Item         Mailing Address 11176 Coontz Rd       C       Transaction ID : SA11Al.4576         Anount of Each Receipt His Period       10       0 0 / 2021         Transaction ID : SA11Al.4576       Anount of Each Receipt His Period         Full Name of Individual       C       Memo Item         Name of Indi	8	C		320.00					
Motorist Insurance       SVP         SVP       S40.00/biweekly         Receipt For:	federal political committee.	U							
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       B40.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. Moore, Marchelle, , ,       Mailing Address 2717 Gatewood Rd.         City       State       Zip Code         OH       43219         FEC. ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Chief Legal Officer       340,00         Receipt For:       Aggregate Year-to-Date ▼         minary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Mailing Address 11176 Coontz Rd       Organization Name         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       Date of Receipt         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       Image: C         Name of Employer (for Individual)       Occupation (for Individual)       Transaction ID : SA11AL4576         Amount of Each Receipt this Pe	Name of Employer (for Individual)		1 ( )	Memo Item					
Aggregate real-00-date ▼         Other (specify) ▼         B. Moore, Marchelle, , , ,         Mailing Address 2717 Gatewood Rd.         City       OH         City       OH         Address 2717 Gatewood Rd.         City       OH         Clumbus       OH         FEC ID number of contributing tederal political committee.       C         Name of Employer (for Individual) Motorists Mutual Insurance Co       Ccupation (for Individual) Chief Legal Officer         Receipt For:       Aggregate Year-to-Date ▼         Mailing Address 11176 Coontz Rd       C         City       State       Zip Code         Orient       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address 11176 Coontz Rd       C       State         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing tederal political committee.       C         Orient       OH       43146         FEC ID number of contributing tederal political committee.       C         Orient       PH       Aggregate Year-to-Date ▼         Mailing Address titre (specify)       V and Business Director         Name of Employer (for Individual)       C       Memo Item		SVF	)	\$40.00/biweekly					
☐ Other (specify)▼       840.00         B.       Moore, Marchelle, , ,         Malling Address 2717 Gatewood Rd.       Zip Code OH         City Columbus       Other (specify)▼         PEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) Motorists Mutual Insurance Co       Occupation (for Individual) Chief Legal Officer         Receipt For: ☐ Other (specify)▼       Aggregate Year-to-Date ▼         Primary       General Other (specify)▼         City City Orient       State Other (specify) ▼         FEC ID number of contributing federal political committee.       Other (specify) ▼         Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼         City Orient       State Other (specify) ▼       Date of Receipt Ibis Period         City Orient       City Other (specify) ▼       Date of Receipt Ibis Period         FEC ID number of contributing federal political committee.       City Other (specify)       Date of Receipt Ibis Period         FEC ID number of contributing federal political committee.       City Orient       0 bis Sat11AL4576         Name of Employer (for Individual) Period Service Corp       Occupation (for Individual) Period Service Corp       120.00         Memo Item \$15.00/biweekly       \$15.00/biweekly       \$15.00/biweekly		Aggregate	Year-to-Date ▼						
B.       Moore, Marchelle, , ,       Date of Receipt         Mailing Address 2717 Gatewood Rd.       0       2021         City       State       Zip Code         Columbus       OH       43219         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual) Motorists Mutual Insurance Co       Occupation (for Individual) Chief Legal Officer       Memo Item         Receipt For:       Primary       General       Officer       840,00         C       Myles, Leslie, , ,       Mailing Address 11176 Coontz Rd       Date of Receipt         City       State       Zip Code       10       09       2021         Mailing Address 11176 Coontz Rd       C       43146       Ech Receipt this Period         FEC ID number of contributing federal political committee.       C       10       09       2021         Mailing Address 11176 Coontz Rd       C       10       09       2021       Transaction ID : SA11AL4576         Orient       FEC ID number of contributing federal political committee.       C       120.00       Memo Item         Name of Employer (for Individual) Encova Service Corp       Occupation (for Individual) VP and Business Director       Memo Item         S15.00/biweekly			840.00						
B.       Moore, Marchelle, , ,         Mailing Address 2717 Gatewood Rd.         City       State       Zip Code         Odumbus       OH       43219         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Maining Address       C       000000000000000000000000000000000000				-					
Mailing Address 2717 Gatewood Rd.         City       State       Zip Code         Columbus       OH       43219         FEC ID number of contributing       C       Transaction ID: SA11AL4578         Amount of Each Receipt this Period       320.00         Mating Address 2717 Gatewood Rd.       Mount of Each Receipt this Period         FEC ID number of contributing       C         federal political committee.       Occupation (for Individual)         Name of Employer (for Individual)       Occupation Name         Other (specify) ▼       Aggregate Year-to-Date ▼         Date of Receipt       Date of Receipt         City       State       Zip Code         Orient       State       Zip Code         Mailing Address 11176 Coontz Rd       C       10         City       State       Zip Code         Orient       C       General       Occupation (for Individual)         FEC ID number of contributing       C       Image of Enceipt this Period         FEC ID number of contributing       C       Image of Enceipt this Period         FEC ID number of contributing       C       Image of Enceipt this Period         Image of Enceipt for:       Aggregate Year-to-Date ▼       Image of Enceipt this Period         <		nitial) or Full C	rganization Name	Data of Descint					
City       State       Zip Code         Columbus       OH       43219         FEC ID number of contributing federal political committee.       C       320,00         Name of Employer (for Individual) Motorists Mutual Insurance Co       Occupation (for Individual) Chief Legal Officer       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       840,00       State       2021         City       General       Other (specify) ▼       Date of Receipt       10       09       2021         City       Grient       Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt       10       09       2021         City       Other (specify) ▼       State       Zip Code       Date of Receipt       10       09       2021         Mailing Address 11176 Coontz Rd       C       Occupation (for Individual)       Primacy       State       Zip Code       10       09       2021       Transaction ID : SA11AL 4576         Mauling Address 11176 Coontz Rd       C       Occupation (for Individual)       Primacy       2021       Transaction ID : SA11AL 4576         Mount of Each Receipt this Period       Image: Sa112 (Sa12)       Image: Sa12 (Sa12)       Image: Sa12 (Sa12)       Image: Sa12 (Sa12)         Name of Employer (for Individual)       Occupation (									
Columbus       OH       43219       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       320.00         Name of Employer (for Individual) Motorists Mutual Insurance Co       Occupation (for Individual) Chief Legal Officer       Memo Item         Receipt For:       Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       S40.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       Date of Receipt         Mailing Address 11176 Coontz Rd       C       10       09       2021         City       State       Zip Code       10       09       2021         Transaction ID : SA11AL.4576       Amount of Each Receipt this Period       120.00       120.00         FEC ID number of contributing federal political committee.       C       Qregregate Year-to-Date ▼       120.00         Name of Employer (for Individual)       Occupation (for Individual)       Primary       Memo Item       \$15.00/biweekty         Receipt For:       Primary       General       Occupation (for Individual)       VP and Business Director       \$15.00/biweekty	Walling Hadrood 2717 Galewood Ru.								
FEC ID number of contributing federal political committee.       C       320.00         Name of Employer (for Individual) (Motorists Mutual Insurance Co       Occupation (for Individual) (Chief Legal Officer       %40.00/biweekly         Receipt For:       Aggregate Year-to-Date ▼       Aggregate Year-to-Date ▼       Date of Receipt         Cther (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         Ctity       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Primary       General       Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼         Other (specify)       Aggregate Year-to-Date ▼	City		Zip Code	Transaction ID : SA11AI.4578					
federal political committee.       320.00         Name of Employer (for Individual) Motorists Mutual Insurance Co       Occupation (for Individual) Chief Legal Officer       Memo Item         Receipt For: Primary General Other (specify) ▼       Aggregate Year-to-Date ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Myles, Leslie, , , Mailing Address 11176 Coontz Rd       Date of Receipt         City Orient       State OH       Zip Code OH       Transaction ID : SA11AL4576         Amount of Each Receipt for: Primary General       Occupation (for Individual) VP and Business Director       Memo Item         Name of Employer (for Individual) Encova Service Corp       Occupation (for Individual) VP and Business Director       Memo Item         Primary General       Aggregate Year-to-Date ▼       Memo Item         Other (specify)       Aggregate Year-to-Date ▼       \$15.00/biweekly	Columbus	OH	43219	Amount of Each Receipt this Period					
Motorists Mutual Insurance Co       Chief Legal Officer         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)       VP and Business Director         Receipt For:       Aggregate Year-to-Date ▼       Memo Item         Primary       General       Olter (specify)		С		320.00					
Primary       General         Other (specify)       ✓         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Myles, Leslie, , ,       Mailing Address 11176 Coontz Rd       Date of Receipt         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Primary       General         Other (specify)       Aggregate Year-to-Date ▼									
Other (specify) ▼       840,00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Myles, Leslie, , ,       Mailing Address 11176 Coontz Rd       Date of Receipt         City       State       Zip Code       10       09       2021         Orient       OH       43146       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       120.00       120.00         Name of Employer (for Individual)       Occupation (for Individual)       VP and Business Director       Memo Item         Receipt For:       Primary       General       Aggregate Year-to-Date ▼       \$15.00/biweekly		Aggregate	Year-to-Date 🔻						
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C.       Myles, Leslie, , , ,       Date of Receipt         Mailing Address 11176 Coontz Rd       Dote of Receipt         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C       Maunut of Each Receipt this Period         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         Primary       General       Aggregate Year-to-Date ▼       \$15.00/biweekly			840.00	1					
C. Myles, Leslie, , ,       Mailing Address 11176 Coontz Rd         Mailing Address 11176 Coontz Rd       Date of Receipt         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C       10       09       2021         Name of Employer (for Individual)       Occupation (for Individual)       VP and Business Director       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       \$15.00/biweekly			, , , , , , , , , , , , , , , , , , , ,	1					
Mailing Address 11176 Coontz Rd         City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C       10       09       2021         Name of Employer (for Individual)       Occupation (for Individual)       120.00       120.00         Encova Service Corp       VP and Business Director       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       \$15.00/biweekly		nitial) or Full C	rganization Name	Date of Beceint					
City       State       Zip Code         Orient       OH       43146         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual)       Occupation (for Individual)       120.00         Encova Service Corp       VP and Business Director       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       \$15.00         Primary       General       315.00       315.00									
Orient     OH     43146       FEC ID number of contributing federal political committee.     C     Amount of Each Receipt this Period       Name of Employer (for Individual)     Occupation (for Individual)     120.00       Encova Service Corp     VP and Business Director     Memo Item \$15.00/biweekly       Receipt For:     Aggregate Year-to-Date ▼     \$15.00/biweekly		1							
FEC ID number of contributing federal political committee.     C     120.00       Name of Employer (for Individual)     Occupation (for Individual)     Memo Item       Encova Service Corp     VP and Business Director     \$15.00/biweekly       Receipt For:     Aggregate Year-to-Date ▼     \$15.00/biweekly									
federal political committee.       120.00         Name of Employer (for Individual)       Occupation (for Individual)         Encova Service Corp       VP and Business Director         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       315.00			40140	Amount of Each Receipt this Period					
Encova Service Corp     VP and Business Director     \$15.00/biweekly       Receipt For:     Aggregate Year-to-Date ▼       Other (specify)     315.00	5	С		120.00					
Receipt For: Primary General Other (specify)  Aggregate Year-to-Date ▼ 315.00			1 ( )						
Primary General Other (specify) 315.00	•			\$15.00/biweekly					
		Aggregate	Year-to-Date ▼						
	Other (specify)	Other (specify) 315.00							
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional).		•	760.00					
TOTAL This Period (last page this line number only)									

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16 OF

21

17							(check only one)					
11	EMIZED RECEIPTS			n category of the I Summary Page		<b>×</b> 11a 13		11b 14	11c	12	1	
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the		oose of	solicitin	g contrib	outions	
	NAME OF COMMITTEE (In Full)			_								
	ENCOVA CIVIC FUND (OF THE		RISTSI	MUTUAL INSU	RAN		CO	MPA	NY CI	VIC F	UND	
<u>v</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization	Name								
Α.	Obrokta, TJ, , ,				_	Date o	f Re	ceipt				
	Mailing Address 8810 Ventura Way			10 09 /						2021	Y	
	City	State	Zip Co	ode		Trans	sact	ion ID :	SA11AI			
	Dublin	OH	430	16	_	Amoun	t of	Each F	Receipt th	nis Peric	d	
	FEC ID number of contributing	С								100	0.00	
	federal political committee.							_	-		-ma	
	Name of Employer (for Individual)			r Individual)				Item				
	Motorists Insurance Group Receipt For:		sident		\$	\$125.00	/biw	eekly				
	Primary General	Aggregate	Year-to-Da	te V								
	Other (specify) <b>v</b>			2550.00								
			J	1	_							
R	Full Name of Individual (Last, First, Middle Initia Peacock, Mark, , Mr.,	al) or Full O	rganization	Name		Date o	f Re	ceint				
υ.	Mailing Address 4460 Swenson Street					M M		D	D / Y	Y Y	Y	
				10 09 2021								
	City	State	Zip Co		_				SA11AI.			
	Hilliard	OH 43026				Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		Ľ.		-		12	0.00			
	Name of Employer (for Individual) Encova Service Corp		Occupation (for Individual) SVP Chief Human Resources Officer				lemc oiwee	ltem ekly				
	Receipt For:	Aggregate	Year-to-Da	te 🔻								
	Other (specify)	· · ·		315.00								
			<b>,</b> , , ,	313.00								
с.	Full Name of Individual (Last, First, Middle Initia Puchala, Damian, , ,	al) or Full O	rganization	Name		Date o	f Re	ceipt				
	Mailing Address 325 Olenview Circle					M M	/	D		Y Y	Y	
	City	State	Zip Co	ada	_	10 09 2021 Transaction ID : SA11AI.4563						
	Powell	OH	4306						Receipt th		nd	
	FEC ID number of contributing					, unio uni		Laoini				
	federal political committee.	С						y		12	0.00	
Name of Employer (for Individual)		Осси	upation (for	Individual)	_	M	lemo	Item				
Motorists Mutual Ins. Company As			st. V. P.	,	:	\$15.00/b	oiwe	ekly				
	Receipt For:	Aggregate	Year-to-Da	te 🔻								
	Other (specify)			315.00								
				-gr								
	· · ·						1			104	0.00	
S	UBTOTAL of Receipts This Page (optional)			•••••	-		÷	9	9	1240	5.00	
т	OTAL This Period (last page this line number o	nly)										

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17 OF

21

			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions					
$\backslash$	ENCOVA CIVIC FUND (OF THE		RISTS MUTUAL INSU	RANCE COMPANY CIVIC FUND)					
Α.	Full Name of Individual (Last, First, Middle Initia Rudowicz, Randolph A., , ,	al) or Full O	Organization Name	Date of Receipt					
	Mailing Address 1026 Loch Ness Avenue								
	City	State	Zip Code	10 09 2021 Transaction ID : SA11AI.4583					
	Worthington	OH	43085	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		200.00					
	federal political committee.								
	Name of Employer (for Individual)		upation (for Individual) Planning Prod & Svs	\$25.00/biweekly					
	Motorists Mutual Ins. Company Receipt For:		Year-to-Date V						
	Primary General	Aggregate							
	Other (specify)		525.00						
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Organization Name						
В.	Smithers, Ralph W., , , Jr.			Date of Receipt					
	Mailing Address 6418 Summers Nook Drive			10 09 2021					
	City	State	Zip Code	Transaction ID : SA11AI.4582					
	New Albany	OH	43054	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		120.00					
	Name of Employer (for Individual) Motorists Mutual Ins. Company		upation (for Individual) MAX Service	Memo Item \$15.00/biweekly					
	Receipt For:	Aggregate	Year-to-Date <b>V</b>						
	Primary     General       Other (specify) ▼		315.00						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Walz, Chris, , ,	al) or Full O	Organization Name	Date of Receipt					
	Mailing Address PO Box 832								
	City	State	Zip Code	10 09 2021 Transaction ID : SA11AI.4561					
	Hurricane	WV	25526	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		160.00					
Name of Employer (for Individual)		Осси	upation (for Individual)	Memo Item					
Brickstreet Insurance			)	\$20.00/biweekly					
			Year-to-Date ▼						
	Other (specify)								
s	UBTOTAL of Receipts This Page (optional)			480.00					
Т	OTAL This Period (last page this line number o	nly)	····· •						

### SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 18 OF

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11	EMIZED RECEIPTS		for each category of Detailed Summary P		¥ 11a 13	11b 14	11c	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				on for the p	ourpose of	soliciting	contribu	tions		
$\left\rangle$	NAME OF COMMITTEE (In Full) ENCOVA CIVIC FUND (OF THE		RISTS MUTUAL	INSUR	ANCE C	OMPA	NY CI	VIC FI	JND)		
A.	Full Name of Individual (Last, First, Middle Initia White, Steven, , ,	al) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 700 Chappell Rd.	07 20 2021									
	City Charleston	State WV	Zip Code 25304			of Each F	-				
	FEC ID number of contributing federal political committee.	С						250.	00		
	Name of Employer (for Individual) Encova Insurance		upation (for Individual) ard Member		Me Payroll De	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500	0.00							
в.	Full Name of Individual (Last, First, Middle Initia Wieland, Steve, , , Mailing Address 204 Mill Street	al) or Full O	Organization Name		Date of	Receipt		ÝÝ	V		
	City	State Zip Code				10 09 2021 Transaction ID : SA11AI.4587					
	Gahanna	ОН	43230			of Each F					
	FEC ID number of contributing federal political committee.	C				-9	-	120.	00		
	Name of Employer (for Individual) Encova Service Corp		cupation (for Individual) P Enterprise Architecture	Me \$15.00/biv	mo Item veekly						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 31:	5.00							
С.	Full Name of Individual (Last, First, Middle Initia Wilcox, Matt, , ,	al) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 250 Daniel Burnham Sq Unit 30	<sup>M</sup> 10	/ D [ 09		y y 2021	Y					
	City Columbus	State OH	Zip Code 43215			of Each F	-				
	FEC ID number of contributing federal political committee.	С				9	. y	640.	00		
	Name of Employer (for Individual) Motorists Insurance Group	Occu EVP	upation (for Individual)		Memo Item \$80.00/biweekly						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1680								
s	UBTOTAL of Receipts This Page (optional)			······ •		,	. ,	1010.	00		
Т	OTAL This Period (last page this line number o	nly)				-9-		9330.	00		

TEMIZED DISBURSEMENTS       Use separate schedule(s) br deal catagory of the petalled Summary Page       (check only one) I 2 ab       23 <t< th=""><th>SC</th><th>HEDULE B (FEC Form 3X)</th><th></th><th></th><th>FC</th><th>OR LINE</th><th>NUMBER: PAGE 19 OF 21</th></t<>	SC	HEDULE B (FEC Form 3X)			FC	OR LINE	NUMBER: PAGE 19 OF 21
Any information copied from such Reports and Statements may not be sold or used by any perior for the procese of soliciting contributions from such committee.       286 <t< td=""><td>ITI</td><td>EMIZED DISBURSEMENTS</td><td>for each</td><td>category of the</td><td></td><td>heck onl</td><td>y one) 22 23 26 27</td></t<>	ITI	EMIZED DISBURSEMENTS	for each	category of the		heck onl	y one) 22 23 26 27
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) ENCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND) Full Name (Last, First, Middle Initial) PURD Bank Maling Address City Katamazoo Gity Full Name (Last, First, Middle Initial) F	An	v information conied from such Poports and State					
PENCOVA CIVIC FUND (OF THE MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND)         Full Name (Last, First, Middle Initial)         Mailing Address         City         Full Name (Last, First, Middle Initial)         Diffee Sought:         House         Office Sought:         House         Disbursement         City         Purpose of Disbursement         Purpose of Disbursement         District:         Purpose of Disbursement         District:         District:         District:         District:         District:         District:         District:         District:         Distrest							
Full Name (Last, First, Middle Initial)       Date of Disbursement         Mailing Address       Other Space         City       State         President       Disbursement         State:       Disbursement         Office Sought:       House         President       Disbursement         State:       Disbursement         State:       Disbursement         Full Name (Last, First, Middle Initial)       Disbursement For:         City       State         President       Disbursement For:         City       State         City       State         Office Sought:       House         Disbursement       City         State:       Disbursement For:         City       State         Office Sought:       House         Disbursement       City         Full Name (Last, First, Middle Initial)       Disbursement for:         City       State       City C	$\backslash$	. ,	10705				
A       PNC Bank       Date of Disbursement         Mailing Address       One Financial Parkway       10       01       2021         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Bank Service Charge       Category/ Transaction D: SB218.4600       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Disbursement       Other (specify)       EC Identification Number         Full Name (Last, First, Middle Initial)       Date of Disbursement       EC Identification Number         State:       Disbursement For: Disbursement       Category/ Type         Full Name (Last, First, Middle Initial)       Date of Disbursement         Amount of Each Disbursement       Category/ Type       Amount of Each Disbursement         Office Sought:       House Disbursement For: Disbursement       Category/ Type       Field Hamme (Last, First, Middle Initial)         State:       Disbursement For: Disbursement       Disbursement For: Disbursement       Category/ Type       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement       EC Identification Number       EC Identification Number         Further of Disbursement       Disbursement For: District:       Disbursement For: Disbursement       Category/ Type       Memo Item		· ·			\L Iľ	NSUR	
Mailing Address       One Financial Parkway         City       State       Zip Code         Kalamazoo       Mailing Address       FEC Identification Number         Candidate Name       Disbursement For:       Transaction ID: SB2/B.4600         Office Sought:       House       Disbursement For:       Transaction ID: SB2/B.4600         Office Sought:       House       Disbursement For:       Transaction ID: SB2/B.4600         Anount of Each Disbursement this Period       Transaction Number       117.00         State:       District:       Other (specify)       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement       Anount of Each Disbursement for:         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Other (specify)       Anount of Each Disbursement for:       Anount of Each Disbursement for:         Office Sought:       House       Disbursement For:       General       Memo Item         FEU Name (Last, First, Middle Initial)       Date of Disbursement       The first							Date of Disbursement
City       State       Zip Code         Purpose of Disbursement       Bank Service Charge       Image: Category         Candidate Name       Disbursement For:       President         Office Sought:       House       Disbursement For:       Image: Category         State:       District:       President       Other (specify)         Full Name (Last, First, Middle Initial)       Date of Disbursement       Disbursement For:         City       State       Zip Code         Purpose of Disbursement       Category/       Text         City       State       Zip Code         Purpose of Disbursement       Category/       Text         City       State       Zip Code         Purpose of Disbursement       Category/       Amount of Each Disbursement         City       State       Zip Code         Purpose of Disbursement       Category/       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       President         City       State       Disbursement       Mailing Address         City       State       Disbursement For:       Category/         Purpose of Disbursement       Category/       Mailing Address         City							
Kalamazoo       Mi       49009         Purpose of Disbursement       Disbursement For:       Category/ Type       Transaction ID: SB218.460 Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       General       117.00         President       Other (specify)       V       Date of Disbursement       117.00         State:       Disbursement       Category/ Prepose of Disbursement       President       Category/ Purpose of Disbursement       President         City       State       Zip Code       President       Category/ Type       President         Office Sought:       House       Disbursement For:       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       Malling Address       Date of Disbursement         City       State       Zip Code       Periodent       Periodent         Purpose of Disbursement       Category/ Type       Purpose of Disbursement       Amount of Each Disbursement this Period         City       State       Disbursement For:       Memo Item       President         Office Sought:       House							
Bark Service Charge   Candidate Name   Category/   Office Sought:   Break Service Charge   Office Sought:   President   Disbursement For:   State:   Disbursement   State:   Disbursement   City   Purpose of Disbursement   Category/   Office Sought:   House   Disbursement   Category/   City   State:   Disformed   Office Sought:   House   Disbursement   Category/   Transaction ID : SB218.4600   Amount of Each Disbursement   Mailing Address   City   Full Name (Last, First, Middle Initial)   State:   Disbursement   City   Purpose of Disbursement   City   Purpose of Disbursement   City   State:   Disbursement   City   Purpose of Disbursement   Category/   City   Purpose of Disbursement   City   State:   Disbursement   City   President   Disbursement For:   Category/   City   State:   Disbursement   City   State:   Disbursement For:   City   Senate   President   Disbursement For:   City   Senat							FEC Identification Number
Candidate Name       Category/ Type       Transaction 10 : 58218.4600         Office Sought:       House       Disbursement For:         President       District:       Memo Item         State:       Disbursement       Memo Item         City       State       Zip Code         Purpose of Disbursement       President       Primary         Category/       State       Zip Code         Purpose of Disbursement       President       Anount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       Category/         State:       Disbursement       Category/       Anount of Each Disbursement         City       State       Zip Code       FEC Identification Number         City       State       Disbursement For:       Memo Item         State:       Disbursement For:       Memo Item       Memo Item         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/       Memo Item       Memo Item         State:       Disbursement For:       Category/       Memo Item       Memo Item         State:       Disbursement For:       Category/       Memo Item       Memo Item					-	_	С
Office Sought:       House       Disbursement For:       117.00         State:       Disbursement For:       0 ther (specify)       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/       Memo Item         City       State       Disbursement For:       Category/         Office Sought:       House       Disbursement For:       Category/         Office Sought:       House       Disbursement For:       Category/         Office Sought:       House       Disbursement For:       Memo Item         Purpose of Disbursement       Other (specify)       Memo Item       Memo Item         State:       Disbursement For:       Category/       Memo Item       Memo Item         City       State       Zip Code       FEC Identification Number       C         City       State       Disbursement For:       Amount of Each Disbursement       Amount of Each Disbursement this Period         City       State       Disbursement For:       Amount of Each Disbursement this Period       Memo Item         State:       Disbursement For:       Memo Item       Mem					Cate	edory/	
Sinde Golgin:       Found       Found       Disdurgention       General         President       District:       President       District:       Memo Item         State:       District:       District:       District:       Date of Disbursement         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: President       Category/ Type       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement this Period       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement       Disbursement this Period         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/ Type       Date of Disbursement         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/ Type       Memo Item         Office Sought:       House       Disbursement For: President       Memo Item         City       State       Disbursement For: President       Memo Item         State:       Disbursement For: President       Memo Item							
State:       District:			1	General			
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Purpose of Disbursement       Category/ Type       Perconditionation Rutified         Candidate Name       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House President       Disbursement For: Other (specify)       Merno Item         State:       District:       Date of Disbursement       Date of Disbursement         City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/ Type       FEC Identification Number         Office Sought:       House President       Disbursement For: Disbursement       FEC Identification Number         Office Sought:       House President       Disbursement For: District:       FEC Identification Number         Office Sought:       House President       Disbursement For: District:       Merno Item         State:       District:       Merno Item       Merno Item		Mailing Address					
Candidate Name   Candidate Name   Office Sought:   House   Senate   President   Other (specify)     State:   Disbursement   City   Purpose of Disbursement   Candidate Name   City   Purpose of Disbursement   Candidate Name   Office Sought:   House   Disbursement For:   Candidate Name   City   Purpose of Disbursement   Candidate Name   Office Sought:   House   Disbursement For:   State:   Disbursement For:   State:   Disbursement For:   State:   Disbursement For:   President   Office Sought:   House   Disbursement For:   State:   Disbursement For:   Subtrotal of Disbursements This Page (optional)		City	State	Zip Code			FEC Identification Number
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Mailing Address       City       State       Zip Code       FEC Identification Number         Purpose of Disbursement       Category/ Type       FEC Identification Number       C         Candidate Name       Category/ Type       Amount of Each Disbursement this Period       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: President       General       Memo Item         State:       District:       Other (specify) ▼       Memo Item	C.	· · · · · · · · · · · · · · · · · · ·					
Purpose of Disbursement       Image: Category/ Category/ Type       Image: Category/ Type         Office Sought:       House       Disbursement For: President       Image: Category/ Type         State:       District:       Memo Item         SUBTOTAL of Disbursements This Page (optional)		Mailing Address					
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SUBTOTAL of Disbursements This Page (optional)							Memo Item
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	CHEDULE B (FEC Form 3X)	Use sen	arate schedule(s)	FOR LINE I	
IT 	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	ny information copied from such Reports and State for commercial purposes, other than using the na				
$\setminus$	NAME OF COMMITTEE (In Full)		<b></b>		
$ \rangle$	ENCOVA CIVIC FUND (OF THE	MOTORI	SISMUTUA	AL INSURA	NCE COMPANY CIVIC FUND)
Α.	Full Name (Last, First, Middle Initial) Carey for Congress				Date of Disbursement
	Mailing Address 211 South Fifth Street				09 27 2021
	City Columbus	State OH	Zip Code 43215		FEC Identification Number
	Purpose of Disbursement Campaign Contribution		+02 IU		С
	Candidate Name				Transaction ID : SB29.4627
				Category/ Type	Amount of Each Disbursement this Period
	Senate	ement For: Primary	General		2900.00
	State: OH District: 15	Other (spe	cny) ▼		Memo Item
в.	Full Name (Last, First, Middle Initial) DeWine Husted for Ohio				Date of Disbursement
	Mailing Address PO Box 341065	07 15 2021			
	City Columbus	State OH	Zip Code 43234		FEC Identification Number
	Purpose of Disbursement Campaign Contribution		C		
	Candidate Name			Category/ Type	Transaction ID : SB29.4622 Amount of Each Disbursement this Period
	Office Sought: House Disburse	ement For: Primary	General		8704.00
	State: OH District:	Other (spe			Memo Item
C.	Full Name (Last, First, Middle Initial) Friends of Hearcel F. Craig				Date of Disbursement
	Mailing Address 1480 Dublin Road		07 06 7 Y Y Y Y 2021		
	City Columbus	State OH	Zip Code 43215		FEC Identification Number
	Purpose of Disbursement Campaign Contribution	· · · · ]	С		
	Candidate Name	Category/ Type	Transaction ID : SB29.4621 Amount of Each Disbursement this Period		
	Office Sought: House Disburse		400.00		
	State: OH District: 15	Primary Other (spe	General cify) ▼		Memo Item
					12004.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE (check only 21b 28a	
Any information copied from such Reports and States or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) ENCOVA CIVIC FUND (OF THE N	me and addr	ess of any politica	al committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Friends of Mark Fraizer  Mailing Address 4679 Winterset Drive				Date of Disbursement
City Columbus Purpose of Disbursement Campaign Contribution	State OH	Zip Code 43220	· · · ·	FEC Identification Number
Candidate Name Office Sought:       X     House     Disburse       Senate     President     Image: Construct to the senate       State:     OH     District:     71	ment For: Primary Other (spec	General cify) ▼	Category/ Type	Transaction ID : SB29.4625 Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) B. Hackett for Ohio Mailing Address 2050 Palouse Drive		Date of Disbursement		
City London Purpose of Disbursement Campaign Contribution Candidate Name	State OH	Zip Code 43140	Category/ Type	FEC Identification Number C Transaction ID : SB29.4623 Amount of Each Disbursement this Period
Office Sought: House Senate President State: OH Disburser President	ment For: Primary Other (spec	General ify)	Туре	1000.00 Memo Item
Full Name (Last, First, Middle Initial) C. Stephens for Ohio Mailing Address 4679 Wintersest Drive				Date of Disbursement
City Columbus Purpose of Disbursement Campaign Contribution Candidate Name	State OH	Zip Code 43220	Category/ Type	FEC Identification Number C Transaction ID : SB29.4624 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President State: OH District: 93	ment For: Primary Other (spec	General Cify) ▼		500.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)				2500.00