

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) One State Farm Plaza c/o Mark Schwamberger, Treasurer, Bloomington IL 61710-0001

Check if different than previously reported. (ACC)

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

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

5. Covering Period 05 / 01 / 2019 through 05 / 31 / 2019

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

Signature of Treasurer Schwamberger, Mark, [Electronically Filed] Date 06 / 11 / 2019

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text"/>	<input type="text" value="161722.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="268666.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19868.42"/>	<input type="text" value="258052.22"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="288534.67"/>	<input type="text" value="419774.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="37500.00"/>	<input type="text" value="168740.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="251034.67"/>	<input type="text" value="251034.67"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

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

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17793.22	240573.76
(ii) Unitemized .....	2075.20	17478.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19868.42	258052.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19868.42	258052.22
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	19868.42	258052.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19868.42	258052.22

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	40.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	40.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	36000.00	165000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1500.00	4300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1500.00	4300.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	- 600.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	37500.00	168740.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37500.00	168740.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19868.42	258052.22
34. Total Contribution Refunds (from Line 28(d)) .....	1500.00	4300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18368.42	253752.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	40.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	40.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Adams, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9300 Poundstone Pl  
 City Greenwood Village State CO Zip Code 80111-3410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2019  
**Transaction ID : 45188F6C0669F47EA09A**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Anger, Victor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 Via Villena  
 City San Clemente State CA Zip Code 92673-6512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2019  
**Transaction ID : 26455F05-9180-48D9-**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**C. Arnold, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Chloe Ct  
 City Bloomington State IL Zip Code 61704-8666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Ovp - Claims  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1041.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2019  
**Transaction ID : 4FF796C2FA821E0F0288**  
 Amount of Each Receipt this Period  
 208.32  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1758.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Barnhart, Danny, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 Split Stone Ln  
 City Bellvue State CO Zip Code 80512-6358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2019  
**Transaction ID : A6CDB9BF-2120-4B56-**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Bossch, Milt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 E Coconino Dr  
 City Chandler State AZ Zip Code 85249-3371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Agency/Sales Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2019  
**Transaction ID : 43E0A5E3ECB9E1234DFC**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**C. Brown, Russell, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 Panorama Dr  
 City Medford State OR Zip Code 97504-5638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2019  
**Transaction ID : 441D82DA70FFC771639A**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Brunson-Wheeler, Natalie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1304 Watersound Way  
 City Bloomington State IL Zip Code 61705-7141  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2019  
 Transaction ID : 4DC7913EC67FCE29E1A4  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Burns, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1821 Highlands in the Woods Dr  
 City Lakeland State FL Zip Code 33813-3810  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 27 / 2019  
 Transaction ID : 4EA49231BD0E6577C64F  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Butler, King, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 Ascott Valley Dr  
 City Johns Creek State GA Zip Code 30097-5923  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 28 / 2019  
 Transaction ID : 47AE8E86C8903EFA3F9F  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Callis, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Pebblebrook Ct  
 City Bloomington State IL Zip Code 61705-6300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2019  
**Transaction ID : 4C1C9BDA91891C2A0820**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**B. Cegon, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2061 Wiltsey Ct SE  
 City Salem State OR Zip Code 97306-6903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 25 / 2019  
**Transaction ID : 4A13984DB07D9F549D22**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Cimons, Wayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1215 H St  
 City Alexandria State VA Zip Code 22307-1434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2019  
**Transaction ID : 4E9EBEB7F7CD67BC8789**  
 Amount of Each Receipt this Period  
 83.32  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Cook-Turner, Kristyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Bent Ct  
 City Bloomington State IL Zip Code 61704-8358  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Svp - Agency & Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2019  
 Transaction ID : 2D5CBFEF-0F9F-42D4-  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Cronin, Pat, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 286 W Coulter Rd  
 City Lapeer State MI Zip Code 48446-8691  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2019  
 Transaction ID : 46F6A20C4769A2456C9A  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Dorsett, Rayman, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1540 S Bentley Ave Apt 402  
 City Los Angeles State CA Zip Code 90025-7379  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2019  
 Transaction ID : 41AAAB7B7B4C09B14CEA  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Dubose, Lacy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12437 Meeting House Rd  
 City Carmel State IN Zip Code 46032-7280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2019  
**Transaction ID : 2821871F9F92403C9E4E**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Edmonds, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18043 SW Scholls Ferry Rd  
 City Beaverton State OR Zip Code 97007-8821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2019  
**Transaction ID : 4655BD8C3A29E84A5587**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Fatzynytyz, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Pecan Ln  
 City Oak Ridge State NJ Zip Code 07438-9164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Claim Specialist-Siu  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2019  
**Transaction ID : B9EA56C110384D858114**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Fatzynytz, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Pecan Ln  
 City Oak Ridge State NJ Zip Code 07438-9164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2019  
**Transaction ID : BECF51A66C2446FCA87D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Fletcher, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6509 Alderbrook Pl  
 City McKinney State TX Zip Code 75071-6884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Enterprise Tech Exec - P&C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2019  
**Transaction ID : 44ED9A024868C89E39D4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Frati, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 840 Cross Creek Dr  
 City Roseburg State OR Zip Code 97471-9839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2019  
**Transaction ID : 4B3D8664D4BE041620FC**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Furer, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 5160

City Salem	State OR	Zip Code 97304-0160
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 05 / 01 / 2019  
**Transaction ID : 49B5A901819F3C6274EF**

Amount of Each Receipt this Period  
 50.00

Memo Item

**B. Gourley, Corkey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39091 McKenzie Hwy

City Springfield	State OR	Zip Code 97478-8603
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 05 / 15 / 2019  
**Transaction ID : 48069E8BBF7E228176DD**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. Gourley, Josh, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5921 Landmark Ln

City Eugene	State OR	Zip Code 97402-7570
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 05 / 29 / 2019  
**Transaction ID : 42A3B7A8A1B6B9B5B1DF**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Harris, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5295 Dark Hollow Rd  
 City Medford State OR Zip Code 97501-9627  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2019  
 Transaction ID : 4AF4B02195ADEA97AEA6  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Higa-Seaver, Tammy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6125 Odell St  
 City Cumming State GA Zip Code 30040-5707  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Ccc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 273.04

Date of Receipt 05 / 29 / 2019  
 Transaction ID : 48C4A9CC8DE2F5E4F194  
 Amount of Each Receipt this Period 57.68  
 Memo Item

**C. Holt, Aubrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4125 SW Dosch Rd  
 City Portland State OR Zip Code 97239-1353  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2019  
 Transaction ID : 474D821338C5149893F6  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 157.68  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Horvath, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8415 Blackwood Dr  
 City Windsor State CO Zip Code 80550-4699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 25 / 2019  
**Transaction ID : 4DE398417F47E843E151**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Karol, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 124 Garden St  
 City Garden City State NY Zip Code 11530-6528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2019  
**Transaction ID : 4F72AB28B45A7724ADE9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Kasten, Luke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3631 Yellowstone Dr  
 City Normal State IL Zip Code 61761-9571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-Agency/Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2019  
**Transaction ID : 4D32A2ACB296345758F8**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Keating, Michael T, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Rose Trce  
 City Saratoga Spgs State NY Zip Code 12866-6537  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 14 / 2019  
**Transaction ID : 4AF4B16BF4BDA2A820EC**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Kilgore, Wanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Village Green Cir  
 City Tyrone State GA Zip Code 30290-1564  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader - Ues  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2019  
**Transaction ID : 42CCA4F442B5BCF1422F**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Korgan, Malyka, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11052 Cimarron St Unit B  
 City Firestone State CO Zip Code 80504-6682  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2019  
**Transaction ID : 2019052214534-1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Kramer, Erik, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4364 Oak Pointe Dr  
 City Brighton State MI Zip Code 48116-9785  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 208.30

Date of Receipt 05 / 21 / 2019  
**Transaction ID : 4516B564851DFD38D3B4**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**B. Kristinus, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3303 Valleywood Cv  
 City Murfreesboro State TN Zip Code 37129-0871  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 05 / 01 / 2019  
**Transaction ID : 973F4431-B24D-4EAC-**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Loftus, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 Lake Ave Apt 206  
 City Saratoga Spgs State NY Zip Code 12866-2742  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1201.86

Date of Receipt 05 / 24 / 2019  
**Transaction ID : 4B3082CE45C4AF09902B**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 483.96  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Manning, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2822 NW Birkendene St  
 City Portland State OR Zip Code 97229-8081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 376.90

Date of Receipt 05 / 23 / 2019  
**Transaction ID : 4983819EB28973837CE7**  
 Amount of Each Receipt this Period 92.30  
 Memo Item

**B. Meek, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Kilborn Ct  
 City Bloomington State IL Zip Code 61704-7001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Bank Credit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 05 / 06 / 2019  
**Transaction ID : 4E2A9B9AEBFAA90DA6E4**  
 Amount of Each Receipt this Period 115.38  
 Memo Item

**C. Melendez, Tammy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7244 W Pacific Ave  
 City Lakewood State CO Zip Code 80227-2676  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 02 / 2019  
**Transaction ID : 4589815B9A626074DA11**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	332.68
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Merten-Dubensky, Barb, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Willits St  
 Apt 501  
 City Birmingham State MI Zip Code 48009-3332  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 30 / 2019  
 Transaction ID : 43F2ADA1739A8DD6BB31  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Miller, Chad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19378 Alianna Loop  
 City Bend State OR Zip Code 97702-3686  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2019  
 Transaction ID : 430BA1A8F7E935CFE85B1  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Miner, Jane Wright, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 119 Pheasant Xing  
 City Glastonbury State CT Zip Code 06033-2857  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Agency Administration Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2019  
 Transaction ID : 49DD9D6DA3EF6204BB6B  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 350.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Monteiro, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Redbridge Ct  
 City Setauket State NY Zip Code 11733-1970  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2019  
**Transaction ID : 43E39C8E1A573F60E42E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Nadelhoffer, Gus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14800 SW 150th Ave  
 City Tigard State OR Zip Code 97224-1154  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 19 / 2019  
**Transaction ID : 471F94B83D26D898560E**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**C. Nicholson, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1341 Highcrest Dr  
 City Medford State OR Zip Code 97504-9351  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2019  
**Transaction ID : 4748B8600EC7FB00FC4D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 141.66  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 24 Derby Way

City Bloomington	State IL	Zip Code 61704-2820
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2019

**Transaction ID : 45F6930BE7EDD94A4AEF**

Amount of Each Receipt this Period  
125.00

Memo Item

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

Mailing Address 11 Pebblebrook Ct

City Bloomington	State IL	Zip Code 61705-6300
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2019

**Transaction ID : 4428A50F713B48ADF53F**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 6868 W Jewell Dr

City Lakewood	State CO	Zip Code 80227-2579
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2019

**Transaction ID : 4C04AC5ECC9B1285E48C**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Rodriguez, Jose Adrian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2409 E Kaibab Pl  
 City Chandler State AZ Zip Code 85249-2969  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2019  
**Transaction ID : 75F3F8E4-4403-4739-**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Sanchez, Christina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41764 Corte Lara  
 City Temecula State CA Zip Code 92592-6314  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2019  
**Transaction ID : 4B2994156FBCB5FCC75A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Schreder, Joy L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1630 Locust Hills Pl  
 City Wayzata State MN Zip Code 55391-1972  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 16 / 2019  
**Transaction ID : 49EC8CB4DD65DB1EF78C**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Schupbach, Schuyler, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9125 Deer Ridge Dr  
 City Bloomington State IL Zip Code 61705-7821  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 15 / 2019  
**Transaction ID : 4190BAE445F2C17C3013**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**B. Slater, Sean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5264 S Haleyville St  
 City Aurora State CO Zip Code 80016-4273  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 233.32

Date of Receipt 05 / 02 / 2019  
**Transaction ID : 4E6FBFA9B8C11FCFE4A4**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**C. Slowikowski, Cora, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3423 Ridgeway Dr SE  
 City Turner State OR Zip Code 97392-9543  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2019  
**Transaction ID : 4149A4F38217AB8ABA34**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	183.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 295 3rd St  
 Apt 5

City Lake Oswego State OR Zip Code 97034-3057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2019

**Transaction ID : 4DABAC29B6D00B0D851C**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 3700 Yellowstone Dr

City Normal State IL Zip Code 61761-9511

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

Name of Employer (for Individual) State Farm Occupation (for Individual) Vp-L/H & Investment Plan Serv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2019

**Transaction ID : 4D65941351F03878686E**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

Mailing Address 6008 Southwind Ln

City McKinney State TX Zip Code 75070-4871

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1041.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2019

**Transaction ID : 41CE8A76B76660B907FD**

Amount of Each Receipt this Period  
 208.32

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2808.32
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Thein, Ron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9406 Crossbow Dr  
 City Bloomington State IL Zip Code 61705-8003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Vp - Financial Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 18 / 2019  
**Transaction ID : 43DE8BA7959F466B4CE4**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**B. Thorp, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1099 SE Oriole St  
 City Grants Pass State OR Zip Code 97526-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 04 / 2019  
**Transaction ID : 482F856251CB1B199455**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**C. Wang, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22522 Bowens Wharf PI  
 City Ashburn State VA Zip Code 20148-6634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1010.10

Date of Receipt 05 / 08 / 2019  
**Transaction ID : 4820848618C0C4570A0D**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	358.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Waterman, Analene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8749 Darley Rd SE  
 City Aumsville State OR Zip Code 97325-9751  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 23 / 2019  
**Transaction ID : 4BB7BF0984D9496E926E**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**B. Watkins, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Burgundy Ct  
 City Bloomington State IL Zip Code 61704-8372  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2019  
**Transaction ID : 4634AFFFABBF3E13995B**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Wilkerson, Emory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 190 Pointer Ridge Trl  
 City Fayetteville State GA Zip Code 30214-7403  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 14 / 2019  
**Transaction ID : 4A8D9D9E127AC59A3CAB**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	335.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Wimmer, Russ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1082  
 City Medford State OR Zip Code 97501-0079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2019  
**Transaction ID : 4E12B568BE4FBE13BCD2**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Wold, Rory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 Martin Dr  
 City Medford State OR Zip Code 97501-8137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2019  
**Transaction ID : 4059A7BBC9CA4430DE51**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	17793.22

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Adrian Smith For Congress**

Mailing Address 1126 Avenue A  
Ste 6

City  
Scottsbluff

State  
NE

Zip Code  
69361-3563

Purpose of Disbursement  
2020 Primary

011

Category/  
Type

Candidate Name

Smith, Adrian, Michael, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NE District: 03

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2019

FEC Identification Number

C C00412890

Transaction ID : 399D85CFB9

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Al Lawson For Congress**

Mailing Address 400 North Adams St.

City  
Tallahassee

State  
FL

Zip Code  
32301

Purpose of Disbursement  
2020 Primary

011

Category/  
Type

Candidate Name

Lawson, Alfred, J., , Jr.

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: FL District: 05

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2019

FEC Identification Number

C C00460261

Transaction ID : 91BBBC8A70

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alaskans For Dan Sullivan**

Mailing Address 3705 Arctic Blvd #447

City  
Anchorage

State  
AK

Zip Code  
99503

Purpose of Disbursement  
2020 Primary

011

Category/  
Type

Candidate Name

Sullivan, Daniel, Scott, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2019

FEC Identification Number

C C00570994

Transaction ID : D981134BE6

Amount of Each Disbursement this Period

1000.00

Memo Item

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Beatty For Congress**

Mailing Address PO Box 172

City Columbus State OH Zip Code 43216

Purpose of Disbursement 2020 Primary

011  
Category/  
Type

Candidate Name  
**Beatty, Joyce, , ,**

Office Sought:  House  Senate  President  
State: OH District: 03

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2019

FEC Identification Number

C C00507368

Transaction ID : EE4C169EA1

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill Foster For Congress**

Mailing Address P.O. Box 9104

City Aurora State IL Zip Code 60598

Purpose of Disbursement 2020 Primary

011  
Category/  
Type

Candidate Name  
**Foster, Bill, , ,**

Office Sought:  House  Senate  President  
State: IL District: 11

Disbursement For: 2020  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2019

FEC Identification Number

C C00435099

Transaction ID : 4758D88F87B

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cathy McMorris Rodgers For Congress**

Mailing Address Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement 2020 Primary

011  
Category/  
Type

Candidate Name  
**McMorris Rodgers, Cathy, , ,**

Office Sought:  House  Senate  President  
State: WA District: 05

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2019

FEC Identification Number

C C00390476

Transaction ID : 8047AF39B0

Amount of Each Disbursement this Period

500.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Cleaver For Congress**

Mailing Address P.O.Box 411872

City Kansas City State MO Zip Code 64141

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name  
**Cleaver, Emanuel, , , II**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: MO District: 05

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2019

FEC Identification Number

C C00395848  
**Transaction ID : 7A23A4AB0F**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dan Lipinski For Congress**

Mailing Address PO Box 520

City Western Springs State IL Zip Code 60558

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name  
**Lipinski, Daniel, William, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)

State: IL District: 03

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2019

FEC Identification Number

C C00405431  
**Transaction ID : EF5828FC02E**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Davis For Congress/Friends Of Davis**

Mailing Address 5956 W. Race Avenue

City Chicago State IL Zip Code 60644

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name  
**Davis, Danny, K., ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IL District: 07

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2019

FEC Identification Number

C C00172619  
**Transaction ID : 16A6FC96A2**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Duffy For Wisconsin**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 538

City Wausau State WI Zip Code 54402-0538

Purpose of Disbursement  
2020 Primary

Candidate Name  
Duffy, Sean, Patrick, ,

Office Sought:  House  Senate  President  
State: WI District: 07

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: 011

Date of Disbursement: 05 / 07 / 2019

FEC Identification Number: C00464339  
Transaction ID : 9C0FC3F18E

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Duffy For Wisconsin**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 538

City Wausau State WI Zip Code 54402-0538

Purpose of Disbursement  
2020 Primary

Candidate Name  
Duffy, Sean, Patrick, ,

Office Sought:  House  Senate  President  
State: WI District: 07

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: 011

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C00464339  
Transaction ID : ADCFA5ED45

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. French Hill For Arkansas**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 7841

City Little Rock State AR Zip Code 72217

Purpose of Disbursement  
2020 Primary

Candidate Name  
Hill, J. French, , ,

Office Sought:  House  Senate  President  
State: AR District: 02

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: 011

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C00551275  
Transaction ID : C5F833E772

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Friends For Gregory Meeks**

Mailing Address 153-01 Jamaica Ave. Suite 535

City Jamaica State NY Zip Code 11432

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name

Meeks, Gregory, Weldon, ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: NY District: 05

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2019

FEC Identification Number

C C00430991

Transaction ID : 27470C1DE4/

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends Of David Schweikert**

Mailing Address PO Box 15785

City Phoenix State AZ Zip Code 85060-5785

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name

Schweikert, David, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)

State: AZ District: 06

Date of Disbursement

MM / DD / YYYY  
05 / 23 / 2019

FEC Identification Number

C C00540617

Transaction ID : 7ED726B1B7/

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Graves For Congress**

Mailing Address PO Box 335

City Calhoun State GA Zip Code 30703

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name

Graves, Tom, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: GA District: 14

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2019

FEC Identification Number

C C00462556

Transaction ID : AE6E5902B6

Amount of Each Disbursement this Period

1000.00

Memo Item

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

2250.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Himes For Congress**

Mailing Address 857 Post Road, #312

City  
Fairfield

State  
CT

Zip Code  
06824

Purpose of Disbursement  
2020 Primary

011

Candidate Name

Himes, James, Andrew, ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2019

FEC Identification Number

C C00434191

**Transaction ID : 7FF2068CD0:**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jimmy Panetta For Congress**

Mailing Address PO Box 1579

City  
Carmel Valley

State  
CA

Zip Code  
93924

Purpose of Disbursement  
2020 Primary

011

Candidate Name

Panetta, James, V., ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: CA District: 20

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2019

FEC Identification Number

C C00592154

**Transaction ID : 875DBF4D28!**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Josh Gottheimer For Congress**

Mailing Address PO Box 584

City  
Ridgewood

State  
NJ

Zip Code  
07451

Purpose of Disbursement  
2020 Primary

011

Candidate Name

Gottheimer, Joshua, S., ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2019

FEC Identification Number

C C00573949

**Transaction ID : 9DACF5CCC**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Judy Chu For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 16633 Ventura Blvd # 1008

City Encino State CA Zip Code 91436

Purpose of Disbursement 2020 Primary

Candidate Name Chu, Judy, May, ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CA District: 27

Date of Disbursement: 05 / 21 / 2019

FEC Identification Number: C00458125  
**Transaction ID : 579AC0261F!**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Lance Gooden For Congress Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2125

City Terrell State TX Zip Code 75160

Purpose of Disbursement 2020 Primary

Candidate Name Gooden, Lance, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 05

Date of Disbursement: 05 / 07 / 2019

FEC Identification Number: C00662601  
**Transaction ID : D2DA2873C3!**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Mad 4 Pa PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 444

City Glenside State PA Zip Code 19038

Purpose of Disbursement 2020 Primary

Candidate Name Dean, Madeleine, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: PA District: 04

Date of Disbursement: 05 / 07 / 2019

FEC Identification Number: C00670844  
**Transaction ID : 3AECA23DB**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. McSally For Senate Inc**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 19128

City Tucson State AZ Zip Code 85710

Purpose of Disbursement  
2020 Primary

Candidate Name  
**McSally, Martha, Elizabeth, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: AZ District:

Date of Disbursement  
MM / DD / YYYY  
05 / 06 / 2019

FEC Identification Number  
C C00666040  
Transaction ID : 567E4E9BBF  
Amount of Each Disbursement this Period  
1500.00

Memo Item

**B. Norma Torres For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 728 W Edna Place

City Covina State CA Zip Code 91722

Purpose of Disbursement  
2020 Primary

Candidate Name  
**Torres, Norma, Judith, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CA District: 35

Date of Disbursement  
MM / DD / YYYY  
05 / 31 / 2019

FEC Identification Number  
C C00557652  
Transaction ID : 899045E98B0  
Amount of Each Disbursement this Period  
1000.00

Memo Item

**C. People For Derek Kilmer**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1381

City Tacoma State WA Zip Code 98402

Purpose of Disbursement  
2020 Primary

Candidate Name  
**Kilmer, Derek, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: WA District: 06

Date of Disbursement  
MM / DD / YYYY  
05 / 21 / 2019

FEC Identification Number  
C C00514893  
Transaction ID : 75626700909  
Amount of Each Disbursement this Period  
500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Richmond For Congress**

Mailing Address 909 Poydras Street  
Suite 1825

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
2020 Primary

011

Category/  
Type

Candidate Name

Richmond, Cedric, Levon, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	1	9

FEC Identification Number

C C00451336

**Transaction ID : 7D0CC51910:**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Robin Kelly For Congress**

Mailing Address PO Box 3411

City  
Chicago

State  
IL

Zip Code  
60654

Purpose of Disbursement  
2020 Primary

011

Category/  
Type

Candidate Name

Kelly, Robin, Lynne, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: IL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	9

FEC Identification Number

C C00539866

**Transaction ID : 2FB9EBE2C4**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Rosen For Nevada**

Mailing Address PO Box 27195

City  
Las Vegas

State  
NV

Zip Code  
89126

Purpose of Disbursement  
2024 Primary

011

Category/  
Type

Candidate Name

Rosen, Jacky, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: NV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	9

FEC Identification Number

C C00606939

**Transaction ID : F5D2BFE0D:**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

3	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Russ Fulcher For Idaho</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address PO Box 1375		FEC Identification Number C C00648295 <b>Transaction ID : 0FFD5D1A9F</b>
City Meridian	State ID	Zip Code 83680-1375
Purpose of Disbursement 2020 Primary		Category/ Type 011
Candidate Name <b>Fulcher, Russell, M., ,</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Scott For Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2019
Mailing Address Post Office Box 251		FEC Identification Number C C00256925 <b>Transaction ID : F72F60376FF</b>
City Newport News	State VA	Zip Code 23607
Purpose of Disbursement 2020 Primary		Category/ Type 011
Candidate Name <b>Scott, Robert, Cortez, ,</b>		Amount of Each Disbursement this Period 250.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 03	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Spanberger For Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address PO Box 3121		FEC Identification Number C C00649913 <b>Transaction ID : BEA3F92E3E</b>
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement 2020 Primary		Category/ Type 011
Candidate Name <b>Spanberger, Abigail, , ,</b>		Amount of Each Disbursement this Period 500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 07	<input type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Spanberger For Congress**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 05 / 30 / 2019

Mailing Address PO Box 3121

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: 2020 Primary  
FEC Identification Number: C00649913  
Transaction ID: C7FD29631D

Candidate Name: Spanberger, Abigail, , ,  
Amount of Each Disbursement this Period: - 500.00

Office Sought:  House,  Senate,  President  
Disbursement For: 2020  
 Primary,  General,  Other (specify) ▼

State: VA, District: 07

Category/Type: 011

Memo Item

**B. Stanton For Congress**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 05 / 23 / 2019

Mailing Address 4340 E Indian School Road Suite 21-518

City: Phoenix, State: AZ, Zip Code: 85018

Purpose of Disbursement: 2020 Primary  
FEC Identification Number: C00657304  
Transaction ID: 9E28635A5C4

Candidate Name: Stanton, Greg, , ,  
Amount of Each Disbursement this Period: 1000.00

Office Sought:  House,  Senate,  President  
Disbursement For: 2020  
 Primary,  General,  Other (specify) ▼

State: AZ, District: 09

Category/Type: 011

Memo Item

**C. Steil For Wisconsin, Inc.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 05 / 16 / 2019

Mailing Address 1818 Milton Ave # 1448

City: Janesville, State: WI, Zip Code: 53545-1129

Purpose of Disbursement: 2020 Primary  
FEC Identification Number: C00677286  
Transaction ID: 5866A2ABAE

Candidate Name: Steil, Bryan, G., ,  
Amount of Each Disbursement this Period: 1000.00

Office Sought:  House,  Senate,  President  
Disbursement For: 2020  
 Primary,  General,  Other (specify) ▼

State: WI, District: 01

Category/Type: 011

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Stephanie Murphy For Congress**

Full Name (Last, First, Middle Initial)  
Stephanie Murphy For Congress

Date of Disbursement: 05 / 22 / 2019

Mailing Address: PO Box 205

City: Winter Park, State: FL, Zip Code: 32790

Purpose of Disbursement: 2020 Primary

Candidate Name: Murphy, Stephanie, N., ,

Office Sought:  House,  Senate,  President

Disbursement For: 2020,  Primary,  General,  Other (specify) ▼

State: FL, District: 07

FEC Identification Number: C00620443  
Transaction ID: C49B94B7A9  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**B. Thom Tillis Committee**

Full Name (Last, First, Middle Initial)  
Thom Tillis Committee

Date of Disbursement: 05 / 21 / 2019

Mailing Address: PO Box 97396

City: Raleigh, State: NC, Zip Code: 27624

Purpose of Disbursement: 2020 General

Candidate Name: Tillis, Thomas, Roland, ,

Office Sought:  House,  Senate,  President

Disbursement For: 2020,  Primary,  General,  Other (specify) ▼

State: NC, District:

FEC Identification Number: C00545772  
Transaction ID: CC5274F0C4  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**C. Thom Tillis Committee**

Full Name (Last, First, Middle Initial)  
Thom Tillis Committee

Date of Disbursement: 05 / 29 / 2019

Mailing Address: PO Box 97396

City: Raleigh, State: NC, Zip Code: 27624

Purpose of Disbursement: 2020 General

Candidate Name: Tillis, Thomas, Roland, ,

Office Sought:  House,  Senate,  President

Disbursement For: 2020,  Primary,  General,  Other (specify) ▼

State: NC, District:

FEC Identification Number: C00545772  
Transaction ID: 8C4F7181F6I  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Zeldin For Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2019	
Mailing Address 47 Flintlock Drive		FEC Identification Number C 00552547 <b>Transaction ID : 248307DF3D/</b> Amount of Each Disbursement this Period 1000.00	
City Shirley	State NY	Zip Code 11967	Category/ Type 011
Purpose of Disbursement 2020 Primary		Memo Item <input type="checkbox"/>	
Candidate Name <b>Zeldin, Lee, M., ,</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY	District: 01		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	36000.00



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

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

FOR LINE NUMBER: (check only one)

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

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

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

**A. Burns, John, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
05 / 13 / 2019

Mailing Address: 1821 Highlands in the Woods Dr

City: Lakeland State: FL Zip Code: 33813-3810

Purpose of Disbursement: Refund of one time credit card pmt made on 4/22/2019

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_

Transaction ID: CFBFED03C

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1500.00