

# 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

ADDRESS (number and street) One State Farm Plaza

Check if different than previously reported. (ACC) c/o Mark Schwamberger, Treasurer,

Bloomington IL 61710-0001

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:

<input type="checkbox"/> Feb 20 (M2)	<input checked="" type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2016 through 04 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mark Schwamberger

Signature of Treasurer Mark Schwamberger [Electronically Filed] Date 05 / 18 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

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="2016"/>		<input type="text" value="122494.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="22479.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="246850.00"/>	<input type="text" value="250100.00"/>
(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="269329.00"/>	<input type="text" value="372594.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="37255.00"/>	<input type="text" value="140520.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="232074.00"/>	<input type="text" value="232074.00"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**State Farm Mutual Automobile Insurance Company Federal Political Action Committee**

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).....	245850.00	249100.00
(ii) Unitemized .....	1000.00	1000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	246850.00	250100.00
(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) .....	246850.00	250100.00
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))..... ▶	246850.00	250100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	246850.00	250100.00

**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 .....	5.00	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37250.00	140500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	37255.00	140520.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37255.00	140520.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	246850.00	250100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	246850.00	250100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5.00	20.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.00	20.00

**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 75
	<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**

**A. Beth Annarino**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3123 Butterfly Dr  
 City Normal State IL Zip Code 61761-9397  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Avp - L/H Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : A1F4B86C3CE045028EBE**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Michael Arnold**  
 Full Name (Last, First, Middle Initial)  
 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 State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 06 / 2016  
**Transaction ID : 5D64E4952DC345D4A34B**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Sandy Arnold**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 43 Stonebrook Ct  
 City Bloomington State IL Zip Code 61704-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Isd Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 04 / 01 / 2016  
**Transaction ID : 3E843BF7166F4A07A21D**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 75
<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**

**A. Jeff J Attar**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11515 Myrrh Ln  
City Frankfort State IL Zip Code 60423-7809  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Sales Leader  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 04 / 07 / 2016  
**Transaction ID : A71FA05E9091483DBADF**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Ron Barlin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2802 Park Ridge Rd  
City Bloomington State IL Zip Code 61704-8432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Director - Enterprise Risk Mgt  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : 748660B5D0AB44998F2D**  
Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Dean Barry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 819 W Arapaho Rd Ste 24B  
City Richardson State TX Zip Code 75080-5040  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Vpo  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1500.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 77786C07A49747ED8FD7**  
Amount of Each Receipt this Period 1500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2050.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 75
	<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**

Full Name (Last, First, Middle Initial)  
**A. David Beigie**

Mailing Address 3101 Fiona Way

City Bloomington State IL Zip Code 61704-7011

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

Name of Employer State Farm Occupation Avp - Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : EAD317AB0F264FB69B91**

Amount of Each Receipt this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Sue Beigie**

Mailing Address 3101 Fiona Way

City Bloomington State IL Zip Code 61704-7011

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

Name of Employer State Farm Occupation 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  
 04 / 04 / 2016  
**Transaction ID : E302CF65560D4EF1A78C**

Amount of Each Receipt this Period  
 250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Allison J Bertsche**

Mailing Address 2505 Piney Run

City Bloomington State IL Zip Code 61705-6482

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

Name of Employer State Farm Occupation Pa Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : EE5E80FFFC94A459B2B**

Amount of Each Receipt this Period  
 300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00

**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:	PAGE 9 OF 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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**

**A. Greg F Black**  
Full Name (Last, First, Middle Initial)

Mailing Address 1904 Crestmoor Cove Cc Ct

City Normal	State IL	Zip Code 61761-5362
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FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm	Occupation Avp - Risk Management
--------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	20	/	2016

**Transaction ID : A9868AABF2B94EE49869**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Steve L Black**  
Full Name (Last, First, Middle Initial)

Mailing Address 1059 Hawkshead St

City Timnath	State CO	Zip Code 80547-4411
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FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm	Occupation Vpo
--------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	18	/	2016

**Transaction ID : B74A80CBD9A942C9AB8A**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. David L Bonenfant**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 MacKenzie Ct

City Bloomington	State IL	Zip Code 61704-7047
---------------------	-------------	------------------------

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

Name of Employer State Farm	Occupation Avp - Internal Audit
--------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	06	/	2016

**Transaction ID : 79D02203A5AC40169441**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<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 10 OF 75
	<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**

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

Date of Receipt 04 / 22 / 2016  
**Transaction ID : 1E548C8CFBA249F19009**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Don D Bright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15288 Ridgewood Dr  
 City Frisco State TX Zip Code 75035-7296  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Claims Mgr - P&C  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 29 / 2016  
**Transaction ID : FC70489EB05445199960**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Clark A Brooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19620 Briar Dr  
 City Bloomington State IL Zip Code 61705-4030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Director-Isd  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 350.00

Date of Receipt 04 / 12 / 2016  
**Transaction ID : 0622F308981A46F1B4F7**  
 Amount of Each Receipt this Period 350.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 75
	<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**

Full Name (Last, First, Middle Initial)  
**A. Robert Brown**

Mailing Address 6 Pin Oak Dr

City Chadds Ford State PA Zip Code 19317-7387

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

Name of Employer State Farm Occupation Vpo

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  
 04 / 05 / 2016  
**Transaction ID : 68ECC52DD5694636BDCF**

Amount of Each Receipt this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. David A Bruno**

Mailing Address 15452 Long Dr

City Bloomington State IL Zip Code 61705-5439

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

Name of Employer State Farm Occupation Corporate Law Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2016  
**Transaction ID : 92E58CE4863747ECB6A3**

Amount of Each Receipt this Period  
 300.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. John J Burns**

Mailing Address 2212 Tyler Trl

City Bloomington State IL Zip Code 61705-8754

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

Name of Employer State Farm Occupation Vpo

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  
 04 / 05 / 2016  
**Transaction ID : 81EFFD6889E44684B435**

Amount of Each Receipt this Period  
 1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<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 75
	<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**

**A. King K Butler**  
 Full Name (Last, First, Middle Initial)  
 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 State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : 9BDF4029F23747239A60**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Leslie S Calkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 Vista Cir  
 City Lander State WY Zip Code 82520-2922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : 99B1ADD98E9048369434**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Kevin B Callis**  
 Full Name (Last, First, Middle Initial)  
 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 State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : E4A556107F74406BA037**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<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 75
	<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**

**A. Michael P Carroll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3006 Wisteria Ln  
 City Bloomington State IL Zip Code 61704-2768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation P&C Claims 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  
 04 / 01 / 2016  
**Transaction ID : FB6EDF459CA64E318BB9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Bill L Cecil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 153 Summit Way  
 City San Francisco State CA Zip Code 94132-2949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Svo Director - Innovation  
 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  
 04 / 08 / 2016  
**Transaction ID : B00B1C59E2EB4FCF9B8B**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Marcia L Charton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 E Shore Rd  
 City Monroe State LA Zip Code 71203-8858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation 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  
 04 / 22 / 2016  
**Transaction ID : 80263EB6DEF042D0B9F6**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<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 75
	<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**

**A. David T Chikahisa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Currie Ct  
 City Bloomington State IL Zip Code 61704-8314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Claims Mgr - P&C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : B66BC16C28EE45E898AA**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Kellie M Clapper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 Ironwood Cc Dr  
 City Normal State IL Zip Code 61761-5306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Avp - Philanthropy/Hr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : CE1D041D01684B18A973**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Ryan Convery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1521 Stoneroller Cir  
 City Bloomington State IL Zip Code 61705-5310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation P&C Underwriting Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 302AC71337A349F88E3F**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<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:	PAGE 15 OF 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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**

**A. Allison G Cooper**  
Full Name (Last, First, Middle Initial)  
Mailing Address 300 Deer Lakes Ct  
City Goodfield State IL Zip Code 61742-9753  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Claim Consultant  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2016  
**Transaction ID : A6BC186AEA9544E49C9C**  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**B. Maureen J Davis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7034 Perimeter Trce E  
City Dunwoody State GA Zip Code 30346-1923  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Avp - Systems  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 11 / 2016  
**Transaction ID : C7E31ABC067F458B8A88**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**C. Rayman N Dorsett**  
Full Name (Last, First, Middle Initial)  
Mailing Address 211 Imperial Dr  
City Bloomington State IL Zip Code 61701-2029  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Vp-Agency/Sales  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2016  
**Transaction ID : AE8C845160AF4F268840**  
Amount of Each Receipt this Period  
2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<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 75
	<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**

**A. Greg T Dorsey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15911 Ballantyne Trl  
 City State Zip Code  
 Huntertown IN 46748-9120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm 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  
 04 / 06 / 2016  
**Transaction ID : 4473B79F886742038D8B**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Jill A Eberle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2808 Vrooman Ct  
 City State Zip Code  
 Bloomington IL 61704-7722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Avp - Life/Health Underwriting  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : E870FF4EA3C1403D97D6**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Suzette M Elliott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 165 Town Square Dr  
 City State Zip Code  
 Mountain View CA 94043-5287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm 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  
 04 / 08 / 2016  
**Transaction ID : 7FF477A6881F40F09961**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<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 75
	<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**

**A. Geoff C Emmel**  
Full Name (Last, First, Middle Initial)

Mailing Address 1630 Stone Creek Cir

City North Liberty State IA Zip Code 52317-8506

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

Name of Employer State Farm Occupation Sales Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : 2D3A5B8BE9794BCBABB**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Bryan J Erckenbrack**  
Full Name (Last, First, Middle Initial)

Mailing Address 2106 Currant Ct

City Bloomington State IL Zip Code 61704-2717

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

Name of Employer State Farm Occupation Leadership Enterprise Dev Assc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016

**Transaction ID : 7F58F187F99D4230A0C0**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C. Martin C Erwin**  
Full Name (Last, First, Middle Initial)

Mailing Address 2212 E Olive St

City Bloomington State IL Zip Code 61701-4312

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

Name of Employer State Farm Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2016

**Transaction ID : DEB923E0B270450887E9**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 18 OF 75
	<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**

**A. John J Fancher**  
Full Name (Last, First, Middle Initial)

Mailing Address 2909 Degarmo Dr

City Bloomington State IL Zip Code 61704-9201

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

Name of Employer State Farm Occupation Agency Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2016  
**Transaction ID : 403F7C49F1F64A038987**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**B. Jon C Farney**  
Full Name (Last, First, Middle Initial)

Mailing Address 3313 Peppertree Ln

City Bloomington State IL Zip Code 61704-8387

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

Name of Employer State Farm Occupation SR Vp, Treasurer And Cfo

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : C11D2182BF8F40EFA613**

Amount of Each Receipt this Period  
 4000.00

Memo Item

**C. Duane C Farrington**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 Worthington Ct

City Bloomington State IL Zip Code 61704-2794

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

Name of Employer State Farm Occupation Evp & Chief Admin Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 4E0CCD1DEBCC4B369B51**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00

**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 19 OF 75
	<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**

**A. Tom Fatzynytz**  
Full Name (Last, First, Middle Initial)

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 State Farm Occupation 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  
 04 / 04 / 2016  
**Transaction ID : 48786D77F36E490F9E45**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Mike W Fields**  
Full Name (Last, First, Middle Initial)

Mailing Address 1515 Beckenham Dr

City Bloomington State IL Zip Code 61704-7630

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

Name of Employer State Farm Occupation Vp-Systems&Chief It Architect

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  
 04 / 06 / 2016  
**Transaction ID : DD042BDB19844F1791D2**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. Paul J Finch**  
Full Name (Last, First, Middle Initial)

Mailing Address 6372 Fenworth Ct

City Agoura Hills State CA Zip Code 91301-4104

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

Name of Employer State Farm Occupation 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  
 04 / 04 / 2016  
**Transaction ID : A47F6851510F4B7E8AEA**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

**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 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Dianne M Fleming**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 904 Birchwood Ave  
 City Bloomington State IL Zip Code 61701-7143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vice President - Systems  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 18 / 2016  
**Transaction ID : 9F6D1624895B4B52AB4D**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

**B. Keith W Flexsenhar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3109 Rudder Ln Apt 307  
 City Bloomington State IL Zip Code 61704-8475  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Director - Ent Chg Mgmt  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 04 / 2016  
**Transaction ID : E90F2338FEC542E9A7F1**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Donya Wills Flohr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3112 Carrington Ln  
 City Bloomington State IL Zip Code 61705-6598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Pa Director  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 06 / 2016  
**Transaction ID : EA0103CC53764D41958E**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<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 21 OF 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Eileen H Flynn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1657 Belclare Rd  
 City Normal State IL Zip Code 61761-4925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 14 / 2016  
**Transaction ID : EFE3CB2A890D432AAC8C**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Kevin Frederick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 152 Old Clinton Rd  
 City Flemington State NJ Zip Code 08822-5536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vice President - Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : 4285062691A0456799E4**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Jim M Freeman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 Stonehedges Ct  
 City Bloomington State IL Zip Code 61705-6312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Development Asoc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : E7B8ED0B9B624C6BA108**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4300.00
<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 75
	<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**

**A. Mike Fuller**  
Full Name (Last, First, Middle Initial)

Mailing Address 14310 Morning Mountain Way

City Milton	State GA	Zip Code 30004-3292
----------------	-------------	------------------------

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

Name of Employer State Farm	Occupation Director-Isd
--------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	18	/	2016

**Transaction ID : D0E4A71B1D9D4D24BE2E**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Curt D Gordon**  
Full Name (Last, First, Middle Initial)

Mailing Address 2909 Lone Oak Rd

City Bloomington	State IL	Zip Code 61705-7802
---------------------	-------------	------------------------

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

Name of Employer State Farm	Occupation P&C Claims Director
--------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	05	/	2016

**Transaction ID : 8C33D602B1774223880E**

Amount of Each Receipt this Period  
500.00

Memo Item

**c. Shirley J Gordon**  
Full Name (Last, First, Middle Initial)

Mailing Address 2409 Tiverton Dr

City Bakersfield	State CA	Zip Code 93311-9380
---------------------	-------------	------------------------

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

Name of Employer State Farm	Occupation Vpo
--------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	11	/	2016

**Transaction ID : 9BAEC57AC0B94F3B8F83**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<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 75
	<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**

**A. Vicki L Gormley-Schoedel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 Mingo Rd  
 City Wexford State PA Zip Code 15090-7556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 500.00

Date of Receipt 04 / 08 / 2016  
**Transaction ID : 536377E4395A496081AF**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Clovis Guevara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3022 Cypress Gardens Dr  
 City Harlingen State TX Zip Code 78550-7455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 500.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : DA10545879924CF89855**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Jason A Guilliams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 444 Colt Cir  
 City Bellville State OH Zip Code 44813-1290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 22 / 2016  
**Transaction ID : D29A7282E5EE45E29B1A**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**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 24 OF 75
	<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**

**A. Kaye W Hacker**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2704 Vrooman Ct  
City Bloomington State IL Zip Code 61704-7836  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Avp - Isd  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : A9112BD8A7074A76B8A0**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Alec F Hagan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4377 Fox Meadow Dr  
City Medina State OH Zip Code 44256-6561  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Vp-Agency/Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 25 / 2016  
**Transaction ID : 0EE0B44CB38F4581955F**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Dawn E Hall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5 Saint Ivans Cir  
City Bloomington State IL Zip Code 61705-9404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Avp - Isd  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : ACBA786DCC7A41F6B30D**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**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 25 OF 75
	<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**

**A. Chris T Hamilton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1402 Guinness Dr  
City Bloomington State IL Zip Code 61705-7132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Bank Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 04 / 05 / 2016  
Transaction ID : 1D9272A2E29E4C37AA92  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Chuck T Hamilton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9450 Janel Dr  
City Bloomington State IL Zip Code 61705-4041  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Claims Mgr - P&C  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 01 / 2016  
Transaction ID : F2713D9270F8454899BE  
Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Rand H Harbert**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 Sunset Rd  
City Bloomington State IL Zip Code 61701-2017  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Evp Chf Agy Sales Mktg Officer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 04 / 05 / 2016  
Transaction ID : 14DBCABABD024D60BBA;  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5750.00  
**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 26 OF 75
	<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**

**A. Linda K Harper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3012 Cormier Dr  
 City Bakersfield State CA Zip Code 93311-2946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : 88BD30A02BD04400A9F5**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Vic V Harper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1607 Ironwood Cc Dr  
 City Normal State IL Zip Code 61761-5223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Finance Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 2DA819CD74D045AB9907**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Phillip G Hawkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7216 Oak Shores Dr  
 City Austin State TX Zip Code 78730-4315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : 09653030F14E4BF899F1**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00  
**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 27 OF 75
	<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**

**A. Clarence S Hearn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1580 Laleiah Dr  
City Cumming State GA Zip Code 30041-9512  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Avp - Human Resources  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2016  
**Transaction ID : ADEEE118299B4D5E85CB**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Ken E Heidrich**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 Hilltop Rd  
City Bloomington State IL Zip Code 61701-2009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Agency Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : D309AB41AC7E4975BA71**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Matt J Heimstead**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2815 Stevenson Dr  
City Bloomington State IL Zip Code 61704-9115  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Director - Enterprise Risk Mgt  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 06 / 2016  
**Transaction ID : E3106527947D4B028CD6**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**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 28 OF 75
	<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**

**A. Wensley J Herbert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2004 Wakefield Ln  
 City Bloomington State IL Zip Code 61704-9198  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Claims  
 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  
 04 / 15 / 2016  
**Transaction ID : 76706A8C3C2544A1AEC7**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. David C Hernandez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12613 Holland Park St  
 City Bakersfield State CA Zip Code 93312-5755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 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  
 04 / 13 / 2016  
**Transaction ID : C5C9AF8794944F878CF7**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**C. Jay T Hieb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3104 Sunningdale Ln  
 City Bloomington State IL Zip Code 61705-5282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : 0B05D4D436794BF98CB6**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<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 29 OF 75
	<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**

Full Name (Last, First, Middle Initial)  
**A. Michael Holmes**

Mailing Address 1575 Spalding Dr

City State Zip Code  
Sandy Spgs GA 30350-4213

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

Name of Employer Occupation  
State Farm Ovp - Claims

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  
 04 / 29 / 2016  
**Transaction ID : 21DB278DD0EE42C58275**

Amount of Each Receipt this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Todd T Hoyt**

Mailing Address 2204 Tyler Trl

City State Zip Code  
Bloomington IL 61705-8754

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

Name of Employer Occupation  
State Farm Vp - Agency/Sales Services

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  
 04 / 06 / 2016  
**Transaction ID : 73164B29052749C2954E**

Amount of Each Receipt this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Jeffrey W Jackson**

Mailing Address 17511 Sandpiper St

City State Zip Code  
Hudson IL 61748-7621

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

Name of Employer Occupation  
State Farm Chief Legal Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : EAC60F2C8B4F43A3A806**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<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 30 OF 75
	<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**

**A. Deon S Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2710 Piney Run  
 City Bloomington State IL Zip Code 61705-6457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : FD806C6379B04ADA8D90**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Lorri S Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3625 Manson Pike Unit 8201  
 City Murfreesboro State TN Zip Code 37129-4149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Adc Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2016  
**Transaction ID : FF15543DEF2748D7985F**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Gregory E Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19287 Inverness Ct  
 City Bloomington State IL Zip Code 61705-5214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : 3DFCC1C810C746FFA59D**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<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 31 OF 75
	<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**

**A. Stuart S Jorgensen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2533 S Madison St  
 City Denver State CO Zip Code 80210-5609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Managing Attorney  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : AB07DA66E6794B088431**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Michael T Keating**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3202 Fiona Way  
 City Bloomington State IL Zip Code 61704-7005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 13 / 2016  
**Transaction ID : 19BF16482C0646FD905A**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Patty L Kelley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24140 Dameron Rd  
 City Lexington State IL Zip Code 61753-7609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Isd Director  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 500.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : 8C8A0C1F6A2E4C3E9CBB**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 32 OF 75
	<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**

**A. Ryan C Kenney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3800 Amaryllis Ct  
 City Columbia State MO Zip Code 65203-6125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : CCE94DA0EE6B4E68B64F**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Dan E Kinney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 221 Leland St  
 City Bloomington State IL Zip Code 61701-5643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Claims  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : DE7FFB104D0342E59428**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Mike W Kish**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 E Empire St # 360-337  
 City Bloomington State IL Zip Code 61704-3532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vice President Agency  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016  
**Transaction ID : 40C72324E98346068B16**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4250.00
<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 33 OF 75
	<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**

**A. Jennifer L Kline**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7432 New Albany Links Dr  
 City New Albany State OH Zip Code 43054-6012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Area Vice President  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 2500.00

Date of Receipt  
 04 / 07 / 2016  
**Transaction ID : B9B4017914E0402EA89F**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Carla J Kogelman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 72440 Sorrel Dr  
 City Bruce Twp State MI Zip Code 48065-3931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt  
 04 / 05 / 2016  
**Transaction ID : DA01F9BC60834ADFAAE0**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Dan J Krause**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18399 Kingsmill St  
 City Leesburg State VA Zip Code 20176-3948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Senior Vice President  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 4000.00

Date of Receipt  
 04 / 22 / 2016  
**Transaction ID : 8C61DF284E444E45BE26**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6750.00
<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 34 OF 75
	<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**

**A. Ken Lam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2005 Foxtail Rd  
 City Bloomington State IL Zip Code 61704-1537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : EDA84E85CBDC40CB8B5C**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Janis A Lancaster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3608 Armstrong Dr  
 City Bloomington State IL Zip Code 61704-2838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Claims Mgr - P&C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : 8C2F38E45C1B476ABDE4**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Chris J Lasky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3211 Baer Rd  
 City Bloomington State IL Zip Code 61704-7003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : 73384B6145FC4421B9D9**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3750.00
<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 35 OF 75
	<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**

**A. Carolyn A Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 Country Club Rd SW  
 City Lakewood State WA Zip Code 98498-5315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Area Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016  
**Transaction ID : FA5763A105C3480EBE76**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Dianne Lerman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 Carney Ct  
 City Bloomington State IL Zip Code 61704-8352  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016  
**Transaction ID : D530F35F19E643C5905B**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Thomas Loftus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16419 Dunlindale Dr  
 City Lithia State FL Zip Code 33547-4042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Area Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2016  
**Transaction ID : FEAE0C1C510C45A59AB4**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 36 OF 75
	<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**

**A. Mitch K Lucie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19995 Jared Dr  
 City Bloomington State IL Zip Code 61705-8801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 25 / 2016  
**Transaction ID : E9A424DF9A1042DEA0CB**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Julie S Maloy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2946 Daventry Ln  
 City Charlottesville State VA Zip Code 22911-5778  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vp-Agency/Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 11 / 2016  
**Transaction ID : 73BACEBD01B84991B68A**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Alan Maness**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8304 Thoreau Dr  
 City Bethesda State MD Zip Code 20817-3164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 4080994A24784C1EAA89**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<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 37 OF 75
	<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**

**A. Annette R Martinez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2613 Crooked Creek Rd  
 City Bloomington State IL Zip Code 61705-6396  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vp - Human Resources  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016  
**Transaction ID : 36F34557B4474119BB9**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Brian E Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2202 Riverwoods Ln  
 City Bloomington State IL Zip Code 61705-8758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Avp - Marketing  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : 28BC8568C4184187B47E**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Robert Mayrose**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Stonebrook Ct  
 City Bloomington State IL Zip Code 61704-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Claim Consultant  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2016  
**Transaction ID : 66537A7294F24B03AA13**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<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 38 OF 75
	<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**

**A. Wendy F Mazza**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 Luckenbach Dr  
 City State Zip Code  
 Allen TX 75013-4633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Vpo  
 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  
 04 / 15 / 2016  
**Transaction ID : 38F2979E9FD94B06BF29**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Gregg S McDonald**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2810 Powell Dr  
 City State Zip Code  
 Bloomington IL 61704-4716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Claims Mgr - P&C  
 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  
 04 / 05 / 2016  
**Transaction ID : D745BEE9692640C4A4B3**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Kevin H McKay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Brookridge Ct  
 City State Zip Code  
 Bloomington IL 61704-6293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Senior Vice President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : CF4232F244984240B153**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<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 39 OF 75
<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**

**A. Steve McManus**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 Derby Way

City Bloomington	State IL	Zip Code 61704-2820
---------------------	-------------	------------------------

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

Name of Employer State Farm	Occupation Svp And General Counsel
--------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016

**Transaction ID : 30A00BA193C74AC68D42**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Ken Meek**  
Full Name (Last, First, Middle Initial)

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 State Farm	Occupation Avp Bank Products
--------------------------------	---------------------------------

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  
 04 / 01 / 2016

**Transaction ID : C93036341EAC4EA0BFF5**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. Christy A Moberly**  
Full Name (Last, First, Middle Initial)

Mailing Address 1319 E Washington St

City Bloomington	State IL	Zip Code 61701-4228
---------------------	-------------	------------------------

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

Name of Employer State Farm	Occupation Svp - Agency & Marketing
--------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016

**Transaction ID : BB84666796AC43418807**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11500.00
<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 40 OF 75
<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**

**A. Stephanie R Mollica**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 Caladonia Ct  
 City Bloomington State IL Zip Code 61704-4185  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 300.00

Date of Receipt 04 / 05 / 2016  
**Transaction ID : 461B0AB551F744CCA158**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Joe R Monk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3111 Fiona Way  
 City Bloomington State IL Zip Code 61704-7011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Svp&Cao-Life,Vp-Hlth,Mutl Fund  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 5000.00

Date of Receipt 04 / 20 / 2016  
**Transaction ID : 720DB59363434167AEBD**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. John Monsanto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 192 Shannon Oaks Dr  
 City Lakeland State FL Zip Code 33813-5664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 1500.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 9A36E12837F94DA389C5**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6800.00  
**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 41 OF 75
	<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**

**A. Sheila Montney**  
Full Name (Last, First, Middle Initial)

Mailing Address 2005 Woodbine Rd

City Bloomington State IL Zip Code 61704-2812

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

Name of Employer State Farm Occupation Avp - Life/Health

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016

**Transaction ID : BB5CBE791F6C4440A281**

Amount of Each Receipt this Period  
 750.00

Memo Item

**B. Wayne W Montney**  
Full Name (Last, First, Middle Initial)

Mailing Address 2005 Woodbine Rd

City Bloomington State IL Zip Code 61704-2812

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

Name of Employer State Farm Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016

**Transaction ID : BD0B1450E40E42689CEE**

Amount of Each Receipt this Period  
 750.00

Memo Item

**C. Rob J Moser**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 Pebblebrook Ct

City Bloomington State IL Zip Code 61705-6300

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

Name of Employer State Farm Occupation Avp - Claims

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016

**Transaction ID : AEB788A4C041427AABED**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

**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 42 OF 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Jill A Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Malibu  
 City Laguna Niguel State CA Zip Code 92677-5646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Claims Mgr - P&C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2016  
**Transaction ID : 3F165A5868B041348449**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Sue Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Greenbriar Ln  
 City Kennett Sq State PA Zip Code 19348-1556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vpo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : 5BBD2DE721D1468786B8**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**C. Julia M Muscott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 Majestic Cv  
 City Milton State GA Zip Code 30004-4568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : 42E89B40FA7444018EB3**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4750.00
<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 43 OF 75
	<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**

**A. Carl D Nguyen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1221 Lansbrook Dr  
 City South Elgin State IL Zip Code 60177-3727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 012EFBD92A00442C813E**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Mark Oakley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 Flint Ct  
 City Bloomington State IL Zip Code 61705-8830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Systems Vice President & Cio  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2016  
**Transaction ID : 3130319C83D6433F9745**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item

**C. Paul M Odland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101 San Remo Pl  
 City Wake Forest State NC Zip Code 27587-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 7D1DA048CA424D88B090**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<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 44 OF 75
	<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**

**A. Todd Oehler**  
Full Name (Last, First, Middle Initial)

Mailing Address 3283 Fire Fly Ct

City Normal State IL Zip Code 61761-9523

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

Name of Employer State Farm Occupation Finance Director

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  
 04 / 04 / 2016  
**Transaction ID : E23B000117F94BA6943D**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B. Brett E Palmer**  
Full Name (Last, First, Middle Initial)

Mailing Address 23 Eastbrook Ln

City Fond Du Lac State WI Zip Code 54935-5455

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

Name of Employer State Farm Occupation 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  
 04 / 11 / 2016  
**Transaction ID : F043A66C911348BDB3ED**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C. Rob R Parent**  
Full Name (Last, First, Middle Initial)

Mailing Address 1406 Watersound Way

City Bloomington State IL Zip Code 61705-7100

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

Name of Employer State Farm Occupation Avp - Acctng

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : CD015C8A4C1C4008AAB6**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

**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 45 OF 75
<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

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**

**A. Kathleen M Pechan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 21411 Hawthorne Arbor Ln  
City Downs State IL Zip Code 61736-9656  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Senior Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **04 / 11 / 2016**  
**Transaction ID : FBBD5F859AD4497F978A**  
Amount of Each Receipt this Period 4000.00  
 Memo Item

**B. Louise L Perrin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 333 N Canal St Apt 2304  
City Chicago State IL Zip Code 60606-1497  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Senior Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **04 / 20 / 2016**  
**Transaction ID : D22CF43408BE4F2789A7**  
Amount of Each Receipt this Period 4000.00  
 Memo Item

**C. Arianne Podojil**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15119 Meadow Farms Ct  
City Louisville State KY Zip Code 40245-5609  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Sales Leader  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 11 / 2016**  
**Transaction ID : 50DB151712974304AB00**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8250.00  
**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 46 OF 75
	<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**

**A. Kyle Pott**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1414 Winterberry Cir  
City Bloomington State IL Zip Code 61705-8001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 04 / 22 / 2016  
Transaction ID : **B4E96C0B21284A17950F**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Dave Prus**  
Full Name (Last, First, Middle Initial)  
Mailing Address 31 Derby Way  
City Bloomington State IL Zip Code 61704-2821  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Avp - Ccc  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 04 / 06 / 2016  
Transaction ID : **E3C1BEFEB7B041F2947F**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Lewis E Pryor**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2813 Stevenson Dr  
City Bloomington State IL Zip Code 61704-9115  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Leadership Enterprise Dev Assc  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 08 / 2016  
Transaction ID : **C6781598E14A4F55A68C**  
Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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 47 OF 75
	<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**

**A. Mary K Quist**  
Full Name (Last, First, Middle Initial)

Mailing Address 9580 Janel Dr

City Bloomington State IL Zip Code 61705-4038

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

Name of Employer State Farm Occupation Leadership Enterprise Dev Assc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016  
**Transaction ID : 9A666C6FCF164BF3AB59**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Rich A Reholz**  
Full Name (Last, First, Middle Initial)

Mailing Address 33 Conway Cir

City Bloomington State IL Zip Code 61704-8286

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

Name of Employer State Farm Occupation Vp-Investment Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2016  
**Transaction ID : 5DE891FB8A9042C3A805**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Simon Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 3324 Brittany Cir

City Bloomington State IL Zip Code 61704-8365

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

Name of Employer State Farm Occupation Leadership Enterprise Dev Assc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 0051AA32D63E4117AA85**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<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 48 OF 75
	<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**

**A. Michael Remmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 604 1/2 OGLESBY AVE

City NORMAL State IL Zip Code 61761-1914

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

Name of Employer State Farm Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 15 / 2016  
Transaction ID : **AB7C106545F1470999A6**

Amount of Each Receipt this Period 1000.00

Memo Item

**B. Kathy M Ress**  
Full Name (Last, First, Middle Initial)

Mailing Address 2403 Kaitlyn Dr

City Bloomington State IL Zip Code 61704-3436

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

Name of Employer State Farm Occupation Claims Mgr - P&C

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 05 / 2016  
Transaction ID : **A905E7D4CF45435C88B6**

Amount of Each Receipt this Period 250.00

Memo Item

**C. John D Robertson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Red Stone Ct

City Bloomington State IL Zip Code 61704-8403

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

Name of Employer State Farm Occupation Avp - Isd

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 12 / 2016  
Transaction ID : **52E6275C6F4A4D39AF78**

Amount of Each Receipt this Period 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 49 OF 75
	<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**

Full Name (Last, First, Middle Initial)  
**A. Jose A Rodriguez**

Mailing Address 2712 Degarmo Dr

City State Zip Code  
Bloomington IL 61704-9177

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

Name of Employer Occupation  
State Farm Vpo

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  
 04 / 04 / 2016  
**Transaction ID : 6651E1A373B14803AC32**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Leif Roll**

Mailing Address 2113 Currant Ct

City State Zip Code  
Bloomington IL 61704-2717

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

Name of Employer Occupation  
State Farm Marketing Vice President

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  
 04 / 20 / 2016  
**Transaction ID : 796472ECA814458D8B27**

Amount of Each Receipt this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Cathy A Roth**

Mailing Address 300 Bowie St  
Apt 3201

City State Zip Code  
Austin TX 78703-4678

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

Name of Employer Occupation  
State Farm Operations Manager

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  
 04 / 19 / 2016  
**Transaction ID : 2E7DE19FFAA04A5EB8F2**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<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 50 OF 75
	<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**

**A. Michele C Russo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Stony Brook Dr  
 City State Zip Code  
 Saratoga Spgs NY 12866-6445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Vpo  
 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  
 04 / 25 / 2016  
**Transaction ID : E40C570EF9FF4CC7AB19**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Martin Sallee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2012 Trotter Ln  
 City State Zip Code  
 Bloomington IL 61704-9178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Benefits Director  
 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  
 04 / 28 / 2016  
**Transaction ID : 6827CDDAC28D4B2DB008**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**c. Chris A Schell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2007 Wrangley Ct  
 City State Zip Code  
 West Chester PA 19380-4149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State Farm Area Vice President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 44C1007969C04DBD9993**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<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 51 OF 75
	<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**

**A. Mary A Schmidt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2003 Foxtail Rd  
 City Bloomington State IL Zip Code 61704-1537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 9FC75FE0AB3C4546BB85**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Rusty J Schopp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 Woodbine Rd  
 City Bloomington State IL Zip Code 61704-2813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Avp - Acctng  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 0A632684B5D84960A490**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Joy L Schreder**  
 Full Name (Last, First, Middle Initial)  
 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 State Farm Occupation Area Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 15 / 2016  
**Transaction ID : D956BF08DB144BCD8010**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00  
**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: PAGE 52 OF 75  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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**

Full Name (Last, First, Middle Initial)  
**A. Schuyler Schubach**

Mailing Address 9125 Deer Ridge Dr

City State Zip Code  
 Bloomington IL 61705-7821

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

Name of Employer Occupation  
 State Farm P&C Claims 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  
 04 / 06 / 2016

**Transaction ID : CE38E2B92C9F4A299A2C**

Amount of Each Receipt this Period  
 250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Cathy Schwamberger**

Mailing Address 110 Lakeside Way

City State Zip Code  
 Folsom CA 95630-6608

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

Name of Employer Occupation  
 State Farm Associate General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2016

**Transaction ID : 7E6279D8154743B298CB**

Amount of Each Receipt this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Barney Shultz**

Mailing Address 6926 N Upper Skyline Dr

City State Zip Code  
 Peoria IL 61614-2220

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

Name of Employer Occupation  
 State Farm Vice President - Counsel

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  
 04 / 12 / 2016

**Transaction ID : 125116B6AECF433CAC7B**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

**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 53 OF 75
	<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**

**A. Carra J Simmons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Derby Way  
 City Bloomington State IL Zip Code 61704-2821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vp- Learning & Dvlpmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2016  
**Transaction ID : D293B4916D5E4CFEB65F**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Larry E Slone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 Whispering Pines Cc Ln  
 City Normal State IL Zip Code 61761-5327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : B72A331774E24AE6BFBE**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Brenda S Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1401 Galliard Ct  
 City Bakersfield State CA Zip Code 93312-3699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Pa Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016  
**Transaction ID : 2DEC1325E14143E585B2**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	3250.00
<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 54 OF 75
	<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**

**A. Paul Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 1915 Cloud St

City Bloomington State IL Zip Code 61701-5731

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

Name of Employer State Farm Occupation Evp Property & Casualty

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : F2D0CC35EDE441EFAAB5**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B. Roberta F Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 6555 E 850 North Rd

City Stanford State IL Zip Code 61774-9587

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

Name of Employer State Farm Occupation Avp & SR It Architect-Systems

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2016  
**Transaction ID : DB22BAD29065437DA470**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C. Angela K Sparks**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 Crooked Creek Ct

City Bloomington State IL Zip Code 61705-6310

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

Name of Employer State Farm Occupation Vp & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 986445A610DC4452ACB5**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

**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 55 OF 75
	<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**

**A. Will C Spears**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Kings Mill Rd  
 City Normal State IL Zip Code 61761-4867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Director  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : 12F838088B0547578A9A**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**B. Kimberly A Sterling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Kilborn Ct  
 City Bloomington State IL Zip Code 61704-7001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Ovp - Underwriting  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2016  
**Transaction ID : B25EA0F3526D4A208373**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Lisa E Stewart**  
 Full Name (Last, First, Middle Initial)  
 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 State Farm Occupation Vp-Life/Health & Mutual Funds  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2016  
**Transaction ID : CF8077EAAF41482E8833**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5400.00
<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 56 OF 75
	<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**

**A. Rob E Stewart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2808 Laurel Ests  
 City Baton Rouge State LA Zip Code 70820-5758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Area Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2016  
**Transaction ID : 1CF0876B40634470B433**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Steve D Straight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 Hodgehaven Cir  
 City Bloomington State IL Zip Code 61704-1506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : CABFE0C856054D6F8D06**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Richard L Sundstrom**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1715 Creek View Dr  
 City Fogelsville State PA Zip Code 18051-1716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : 8E2343985EE946038D16**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3050.00
<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 57 OF 75
	<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
-----------------------------	-----------------------------	-----------------------------

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**

**A. Eric C Sutton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3009 Highbury Pl  
 City Weddington State NC Zip Code 28104-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Sales Leader  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2016  
**Transaction ID : C89DD1E1B4B44AD7964F**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Maureen E Thomas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9822 Mahogany Run  
 City Ijamsville State MD Zip Code 21754-9744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Agency Administration Leader  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : 8AD1AE1397DB4945BE6E**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Michael Tipsord**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Windsong Way  
 City Bloomington State IL Zip Code 61704-8350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Farm Occupation Vice Chairman, President & Ceo  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 4AB76953951743408A70**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<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 58 OF 75
	<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**

**A. Matt W Tobben**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 Clear Lake Ct

City Danville State CA Zip Code 94506-1200

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

Name of Employer State Farm Occupation 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  
 04 / 12 / 2016  
**Transaction ID : 2627868E3D9E4248B252**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Michael L Trout**  
Full Name (Last, First, Middle Initial)

Mailing Address 2997 E 1000 North Rd

City Stanford State IL Zip Code 61774-7519

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

Name of Employer State Farm Occupation Vpo - Human Resources

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  
 04 / 01 / 2016  
**Transaction ID : C186CBF268F242459D56**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**C. Brian Truttmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 3912 Rave Rd

City Bloomington State IL Zip Code 61705-8749

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

Name of Employer State Farm Occupation Planning & Analysis Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : 80C6DDD049444559B101**

Amount of Each Receipt this Period  
 300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2050.00
<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 59 OF 75
<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**

Full Name (Last, First, Middle Initial)  
**A. Angelica Valenzuela**

Mailing Address 9213 Via Lugano

City Bakersfield State CA Zip Code 93312-6651

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

Name of Employer State Farm Occupation Operations Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2016

**Transaction ID : 9A2F2CB59FDA48D19D2D**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Carla C Vandongen**

Mailing Address 11 Bent Tree Ln

City Towanda State IL Zip Code 61776-7511

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

Name of Employer State Farm Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016

**Transaction ID : 9D686659AD0648A69365**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Sherri Wade**

Mailing Address 403 McGinnis Way

City Milton State GA Zip Code 30004-0987

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

Name of Employer State Farm Occupation Vpo

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2016

**Transaction ID : 55406E7B1B2446BBAE0E**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<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 60 OF 75
	<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**

Full Name (Last, First, Middle Initial)  
**A. Ernest R Walker**

Mailing Address 27334 Bonterra Loop  
Apt 202

City Wesley Chapel State FL Zip Code 33544-5141

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

Name of Employer State Farm Occupation Sales Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016  
**Transaction ID : CCE072D7F5C04607979C**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Cathy Wallace**

Mailing Address 9 Derby Way

City Bloomington State IL Zip Code 61704-2821

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

Name of Employer State Farm Occupation Chief Risk Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016  
**Transaction ID : 8A296423F632484C8BFB**

Amount of Each Receipt this Period  
4000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bob L Watkins**

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 State Farm Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016  
**Transaction ID : 2F58197749904AE2B737**

Amount of Each Receipt this Period  
1250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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 61 OF 75
	<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**

**A. Chadd M Watson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4290 Great Falls Loop  
City Reno State NV Zip Code 89511-6077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Sales Leader  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 04 / 2016  
**Transaction ID : 97913370263B4D568E20**  
Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Harolyn M Watts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23 Pebblebrook Ct  
City Bloomington State IL Zip Code 61705-6300  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Asst Vice President - Claims  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 07 / 2016  
**Transaction ID : 14C6B3E7D471479D8781**  
Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Jack W Watts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 Arbor Ct  
City Bloomington State IL Zip Code 61704-9113  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Occupation Ovp - Isd  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 04 / 08 / 2016  
**Transaction ID : AA674DAA96A94CC99002**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 3500.00  
**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 62 OF 75
	<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**

**A. Eric Webster**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 Paige Pl

City Bloomington State IL Zip Code 61704-8273

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

Name of Employer State Farm Occupation Vpo - Marketing

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  
 04 / 05 / 2016  
**Transaction ID : 14BB18832E5041909EB9**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**B. Jack H Weekes**  
Full Name (Last, First, Middle Initial)

Mailing Address 3208 Trumpet Ln

City Bloomington State IL Zip Code 61704-2754

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

Name of Employer State Farm Occupation Operations Vice President

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  
 04 / 08 / 2016  
**Transaction ID : DBB279CA129D4BC19F4D**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C. Tim D Westerman**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 Peaceful Rd

City Chesapeake State VA Zip Code 23322-2248

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

Name of Employer State Farm Occupation 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  
 04 / 07 / 2016  
**Transaction ID : 45153E37E06844FCA6C0**

Amount of Each Receipt this Period  
 500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<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 63 OF 75
	<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

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**

**A. Mike S Wey**  
Full Name (Last, First, Middle Initial)

Mailing Address 19352 Briar Dr

City Bloomington State IL Zip Code 61705-4035

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

Name of Employer State Farm Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 6BD548F8939F4E7EAAD6**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Andy P Wieduwilt**  
Full Name (Last, First, Middle Initial)

Mailing Address 2004 Sinclair Ct

City Bloomington State IL Zip Code 61704-4591

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

Name of Employer State Farm Occupation Leadership Enterprise Dev Assc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016  
**Transaction ID : 8188A1CF29A44A92968A**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Clint R Wilson**  
Full Name (Last, First, Middle Initial)

Mailing Address 10870 Harbor Bay Dr

City Fishers State IN Zip Code 46040-9012

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

Name of Employer State Farm Occupation Sales Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 6208198C441E4E9EAA1D**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5750.00

**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 64 OF 75
	<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**

**A. Laura Wyrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 3904 Rave Rd

City Bloomington State IL Zip Code 61705-8749

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

Name of Employer State Farm Occupation Director - Enterprise Risk Mgt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : 40C1833100074F61806A**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Robert H Yi**  
Full Name (Last, First, Middle Initial)

Mailing Address 3616 Tahoe Ct

City Normal State IL Zip Code 61761-9573

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

Name of Employer State Farm Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : 5539ACA034EE48ED81B5**

Amount of Each Receipt this Period  
 4000.00

Memo Item

**C. Larry Ziegler**  
Full Name (Last, First, Middle Initial)

Mailing Address 3308 Monterey Rd

City Bloomington State IL Zip Code 61704-2920

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

Name of Employer State Farm Occupation Bank Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : 53F2C81C40014B069F26**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	245850.00



**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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Ann Wagner for Congress**

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**Ann Louise Wagner**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

Transaction ID : BDF290815980BE28EBE

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Becerra for Congress**

Mailing Address PO Box 71584

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**Xavier Becerra**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 34

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : F05382ED2C1C29B62AB

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bennet for Colorado**

Mailing Address PO Box 3078

City Denver State CO Zip Code 80201

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**Michael F. Bennet**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2016

Transaction ID : AC7A8CCACF5D9B4C9AF

Amount of Each Disbursement this Period

500.00

Memo Item

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

2500.00

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

**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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Bill Shuster for Congress**

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**William F. Shuster**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : B2F845C19BD9ED6D4C2

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill Shuster for Congress**

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**William F. Shuster**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : 8F2E4A3CF5CD7AC69A3

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bob Goodlatte for Congress Committee**

Mailing Address PO Box 292

City Roanoke State VA Zip Code 24002

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**Robert William Goodlatte**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 06

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : 750924091D49DC107CD

Amount of Each Disbursement this Period

2500.00

Memo Item

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

5000.00

**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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Carlos Curbelo Congress**

Mailing Address 8724 SW 72nd St

City Miami State FL Zip Code 33173-3512

Purpose of Disbursement  
2016 Primary

011  
Category/  
Type

Candidate Name

**Carlos Luis Curbelo**

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2016

**Transaction ID : 81706B5F78CE3E21CBF**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cathy McMorris Rodgers for Congress**

Mailing Address Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement  
2016 Primary

011  
Category/  
Type

Candidate Name

**Cathy McMorris Rodgers**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

**Transaction ID : 952CFBC5D555E0E15D1**

Amount of Each Disbursement this Period

1000.00

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  
2016 Primary

011  
Category/  
Type

Candidate Name

**Cathy McMorris Rodgers**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2016

**Transaction ID : 1FC989AF2DBCDAB6A0A**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

2500.00

**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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. DelBene for Congress**

Mailing Address PO Box 487

City Bothell State WA Zip Code 98041

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Suzan Kay DelBene**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 01

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2016

**Transaction ID : BF8DE71F93951F03282**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Duffy for Congress**

Mailing Address PO Box 538

City Wausau State WI Zip Code 54402-0538

Purpose of Disbursement  
2016 General

011

Candidate Name

**Sean Patrick Duffy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 07

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2016

**Transaction ID : 0C3D461E6964C445E31**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Dan Kildee**

Mailing Address PO Box 248

City Flint State MI Zip Code 48501

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Daniel Timothy Kildee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MI District: 05

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

**Transaction ID : DF4140BACB85A8B14A4**

Amount of Each Disbursement this Period

250.00

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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Friends of Jeb Hensarling**

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382-0504

Purpose of Disbursement  
2016 General

011  
Category/  
Type

Candidate Name

**Thomas Jeb Hensarling**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

**Transaction ID : F26226C4350EC9FF3C3**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of John Thune**

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
2016 Primary

011  
Category/  
Type

Candidate Name

**John Randolph Thune**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

**Transaction ID : 130B4F13474C9D981D8**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gregg Harper for Congress**

Mailing Address Post Office Box 54344

City Pearl State MS Zip Code 39288

Purpose of Disbursement  
2016 General

011  
Category/  
Type

Candidate Name

**Gregg Harper**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MS District: 03

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

**Transaction ID : 186C2A9A362D735AC04**

Amount of Each Disbursement this Period

1000.00

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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Hoeven for Senate**

Mailing Address PO Box 861

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
2016 Primary

011  
Category/  
Type

Candidate Name

**John Henry Hoeven III**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ND District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

**Transaction ID : ED13E0C4CE2E35323DB**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeff Merkley for Oregon**

Mailing Address PO Box 14172

City Portland State OR Zip Code 97293

Purpose of Disbursement  
2020 Primary

011  
Category/  
Type

Candidate Name

**Jeffery A. Merkley**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
04 / 11 / 2016

**Transaction ID : 59E368BF0FC1C86BE29**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LaHood for Congress**

Mailing Address PO Box 10735

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
2016 General

011  
Category/  
Type

Candidate Name

**Darin M. LaHood**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2016

**Transaction ID : 8A5CCF149431165166D**

Amount of Each Disbursement this Period

1000.00

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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Leahy for U.S. Senator Committee**

Mailing Address PO Box 1042

City Montpelier State VT Zip Code 05601

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Patrick Joseph Leahy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VT District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

**Transaction ID : 49B3B7545A7C682EA28**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mike Crapo for US Senate**

Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement  
2016 General

011

Candidate Name

**Michael Dean Crapo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ID District:

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2016

**Transaction ID : A062F9087C56E2B201E**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mike Rogers for Congress**

Mailing Address 123 East 13th Street

City Anniston State AL Zip Code 36201

Purpose of Disbursement  
2016 General

011

Candidate Name

**Michael Dennis Rogers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AL District: 03

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

**Transaction ID : 2E26CF0DFE8A8A9C7F3**

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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Mulvaney for Congress**

Mailing Address PO Box 1975

City Lancaster State SC Zip Code 29721

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**John Michael Mulvaney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SC District: 05

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

Transaction ID : 0489AE5084604232CB5

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Peters for Michigan**

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement  
2020 Primary

011

Candidate Name

**Gary Charles Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : B59A3F8DF6EEA4AA8B1

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Poliquin for Congress**

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Bruce Lee Poliquin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : 34DC2348BD56BB1E1FE

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Randy Hultgren for Congress**

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174-0717

Purpose of Disbursement  
2016 General

011

Candidate Name  
**Randall Mark Hultgren**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IL District: 14

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : A702FAC0D3778FCC70B

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ron Johnson for Senate Inc**

Mailing Address 219 E Washington Ave Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement  
2016 Primary

011

Candidate Name  
**Ronald H. Johnson**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WI District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : D780D1BC3FBD7B5062E

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ron Johnson for Senate Inc**

Mailing Address 219 E Washington Ave Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement  
2016 Primary

011

Candidate Name  
**Ronald H. Johnson**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WI District:

Date of Disbursement

MM / DD / YYYY  
04 / 11 / 2016

Transaction ID : 9FDAE246F8DF58FBDC3

Amount of Each Disbursement this Period

1000.00

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"/> 24	<input type="checkbox"/> 25	<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

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**

Full Name (Last, First, Middle Initial)

**A. Rothfus for Congress**

Mailing Address PO Box 435

City Sewickley State PA Zip Code 15143

Purpose of Disbursement  
2016 Primary

Candidate Name

**Keith James Rothfus**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

**Transaction ID : C48465630BC12A06411**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Royce Campaign Committee**

Mailing Address PO Box 3249

City Fullerton State CA Zip Code 92834-3249

Purpose of Disbursement  
2016 General

Candidate Name

**Edward Randall Royce**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

**Transaction ID : 3E7A7E8F150883347D7**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ryan for Congress, Inc.**

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547-1488

Purpose of Disbursement  
2016 Primary

Candidate Name

**Paul Davis Ryan Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2016

**Transaction ID : 1F413B65D32BC6147C4**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

5500.00

**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"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. Ryan for Congress, Inc.**

Mailing Address PO Box 1488

City: Janesville State: WI Zip Code: 53547-1488

Purpose of Disbursement  
2016 General

Category/  
Type

Candidate Name

**Paul Davis Ryan Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

/  /

**Transaction ID : 664A266629E4912ABDC**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Shelby for U S Senate**

Mailing Address PO Box 1091

City: Tuscaloosa State: AL Zip Code: 35403-1091

Purpose of Disbursement  
2016 General

Category/  
Type

Candidate Name

**Richard Craig Shelby**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AL District:

Date of Disbursement

/  /

**Transaction ID : CB58B27DB532F74823B**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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