

**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 83 OF 152
	<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. 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 EVP PROPERTY & CASUALTY  
 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 / 02 / 2015  
**Transaction ID : 817E1AE1D0464AC18504**  
 Amount of Each Receipt this Period  
 5000.00

**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 AVP - LIFE/HEALTH ACTUARY  
 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  
 03 / 31 / 2015  
**Transaction ID : 47861CDB84A347A9A14E**  
 Amount of Each Receipt this Period  
 1000.00

**C. Emory A. Wilkerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 190 Pointer Ridge Trl  
 City Fayetteville State GA Zip Code 30214-7403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation ASSOCIATE GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2015  
**Transaction ID : 7824FAE94D9B4CB9A4B2**  
 Amount of Each Receipt this Period  
 500.00

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