

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 OF 55

(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)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mahaffey, Michael, William, ,

Mailing Address 2205 Wingate Dr

City
DelawareState
OHZip Code
43015-9275FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

EVP, Chief Strategy & Corporate Devel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2020

Transaction ID : EMP202004161197

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McClure, Terry, W, ,

Mailing Address 2684 Road 151

City
Grover HillState
OHZip Code
45849-9519FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Member-BOD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2020

Transaction ID : RET-FOM-202003262

Amount of Each Receipt this Period

416.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonnell, Jennifer, H, ,

Mailing Address 323 W Barnard St

City
West ChesterState
PAZip Code
19382-2820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Director, Institutional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2020

Transaction ID : EMP202004161463

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

633.90

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