

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Association of Mutual Insurance Companies PAC**

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

**A. Carlson, Jared, , ,**

Mailing Address 101 N Wooster St

City  
Algona

State  
IA

Zip Code  
50511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Heartland Mutual Insurance Association

Occupation (for Individual)  
Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 08 / 2020

**Transaction ID : AED3AE5D1373547CBBCT**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Carlson, Jared, , ,**

Mailing Address 101 N Wooster St

City  
Algona

State  
IA

Zip Code  
50511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Heartland Mutual Insurance Association

Occupation (for Individual)  
Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 20 / 2020

**Transaction ID : A839118EF709648FEBFD**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Chamness, Charles, M., ,**

Mailing Address PO Box 68700

City  
Indianapolis

State  
IN

Zip Code  
46268

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
National Association of Mutual Insuran

Occupation (for Individual)  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1896.00

Date of Receipt

05 / 26 / 2020

**Transaction ID : AB5A0EE41A18E4D9988D**

Amount of Each Receipt this Period

316.00

☐ Memo Item

Payroll Deduction: \$158.00/Bi-Weekly

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

416.00

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