

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)

American Property Casualty Insurance Association Political Action Committee

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

A. Hornick, Slade, , ,

Mailing Address 7420 Fish Pond Rd

City
Waco

State
TX

Zip Code
76710-1010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Texas Farm Bureau Insurance Companies

Occupation (for Individual)

Vice President, Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 22 / 2019

Transaction ID : 2019022512375-3

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

B. Huebner, Jeffrey, W, ,

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CSAA Insurance Group

Occupation (for Individual)
Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2019

Transaction ID : 1AB63CD2519C4AB8A73C

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Insley, Susan, J, ,

Mailing Address 1 Park Cir

City

Westfield Center

State

OH

Zip Code

44251-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Westfield Insurance

Occupation (for Individual)
Director, Ohio Farmers Insurance Comp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 14 / 2019

Transaction ID : 0ED9D8C130174FD69AA6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1120.00