

# **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 Family Mutual Insurance Company, S.I. Federal PAC (AMFAM PAC)**

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

**A. Salzwedel, Jack, C, ,**

Mailing Address 6000 American Pkwy

City  
Madison

State  
WI

Zip Code  
53783-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFMIC American Family Mutual Insurance

Occupation (for Individual)

Chair and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2020

**Transaction ID : AB67A58B2E9014A4C93F**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**B. Stauffacher, Jessica, J, ,**

Mailing Address 3500 Packerland Dr

City  
De Pere

State  
WI

Zip Code  
54115-9034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

IDS Property Casualty Insurance Compan

Occupation (for Individual)

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2020

**Transaction ID : AB06D87A39B574DC19B0**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**C. Stauffacher, Jessica, J, ,**

Mailing Address 3500 Packerland Dr

City  
De Pere

State  
WI

Zip Code  
54115-9034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

IDS Property Casualty Insurance Compan

Occupation (for Individual)

President & CEO

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  
02 / 21 / 2020

**Transaction ID : A3784CCB2E832455ABD6**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

358.33