

# **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. Wallace, Richard, L, ,**

Mailing Address 4200 Corporate Dr  
Ste 120

City  
West Des Moines

State  
IA

Zip Code  
50266-5903

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

Sales District Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 28 / 2019

**Transaction ID : ADD2FF594B5A94E44ADC**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Stitz, Melissa, A, ,**

Mailing Address W236N1402 Busse Rd

City

Waukesha

State

WI

Zip Code

53188-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

Sales District Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 28 / 2019

**Transaction ID : A6A2E74853C47467299F**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Smith, Alice, A, ,**

Mailing Address 302 N Walbridge Ave

City

Madison

State

WI

Zip Code

53714-1958

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

SIU Investigations Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 28 / 2019

**Transaction ID : A4D1350F09ADC4E04B35**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00