

# **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. Theilen, Mary, A, ,**

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)

American Family Mutual Insurance Compa

Occupation (for Individual)

Personal Lines President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.96

Date of Receipt

06 / 28 / 2019

Transaction ID : A1E5C3D5E6A9046F1B67

Amount of Each Receipt this Period

27.08

☐ Memo Item

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

**B. Martin, Ross, A, ,**

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)

American Family Mutual Insurance Compa

Occupation (for Individual)

State Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

06 / 28 / 2019

Transaction ID : A885B3BC08625485980D

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. 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)

American Family Mutual Insurance Compa

Occupation (for Individual)

Chairman and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

06 / 28 / 2019

Transaction ID : AEAAEAAFA73424931BC1

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

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

270.41