

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

ADDRESS (number and street)

One Park Circle

P.O. Box 5001

Check if different  
than previously  
reported. (ACC)

Westfield Center

OH

44251-5001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00376863

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
11 29 2022

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Taylor, Jaclyn, S., ,

Type or Print Name of Treasurer

Signature of Treasurer

Taylor, Jaclyn, S., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 30 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 29 / 2022 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2022</span>		<span style="border: 1px solid black; padding: 2px;">53197.59</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">19669.59</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">5662.00</span>	<span style="border: 1px solid black; padding: 2px;">76884.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">25331.59</span>	<span style="border: 1px solid black; padding: 2px;">130081.59</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">104750.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">25331.59</span>	<span style="border: 1px solid black; padding: 2px;">25331.59</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5135.00	59055.00
(ii) Unitemized .....	527.00	15329.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5662.00	74384.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5662.00	74384.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5662.00	76884.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5662.00	76884.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	24000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	80750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	104750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	104750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5662.00	74384.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5662.00	74384.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

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

A. Adams, Kevin, , ,

Mailing Address 101 Fieldcrest Circle

City  
HendersonvilleState  
TNZip Code  
37075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield GroupOccupation (for Individual)  
Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22088

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

B. Ahlborn Jr., August, A, ,

Mailing Address 3914 Boxelder Dr.

City  
MedinaState  
OHZip Code  
44256FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance CompanyOccupation (for Individual)  
Enterprise Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22089

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

C. Aretz, Christopher, A., ,

Mailing Address 850 Hampton Ridge Drive

City  
AkronState  
OHZip Code  
44313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield GroupOccupation (for Individual)  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22093

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

90.00

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

# **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  
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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Barnhart, Aaron, , ,**

Mailing Address 1929 Oakridge Drive

City  
Akron

State  
OH

Zip Code  
44313

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Bank

Occupation (for Individual)  
Retail Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22222**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**B. Bear, Eric, , ,**

Mailing Address 2944 Preakness

City  
Stow

State  
OH

Zip Code  
44224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Small Business Accounts Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22096**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**C. Berthold, Matthew, A., ,**

Mailing Address 5215 Hanover Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Bank

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22223**

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Payroll Deduction

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

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

165.00

# **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  
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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Bowers, James, , ,**

Mailing Address 2262 Irene Road

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Complex Claims Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22100**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**B. Bowers, Robert, , ,**

Mailing Address 176 Parkview Drive

City  
Aurora

State  
OH

Zip Code  
44202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22101**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**C. Buonocore, Therese, , ,**

Mailing Address 4814 Debbie Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22103**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

A. **Busic, Carrie, , ,**

Mailing Address 707 Pleasant Valley

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Small Business Underwriter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22104

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Payroll Deduction

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

B. **Call, Timothy, , ,**

Mailing Address 238 Burnfield Road

City  
Little Hocking

State  
OH

Zip Code  
45742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
General Adjuster - Property

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22106

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

C. **Carney, Michael, , ,**

Mailing Address 633 Baldwin Heights Circle

City  
Howard

State  
OH

Zip Code  
43028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield

Occupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22108

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

210.00

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

# **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)

PAGE 10 OF 30

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

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Carrino, Frank, , ,**

Mailing Address 3564 Old Hickory Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Management Company

Occupation (for Individual)  
Secretary and Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22109**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Payroll Deduction

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

**B. Chambliss, Cassie, , ,**

Mailing Address 8677 Yoder Road

City

Wadsworth

State

OH

Zip Code

44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
CL Regulatory Compl Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22110**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**C. Curnutte, Patricia, , ,**

Mailing Address 736 Sanville Drive

City

Lewis Center

State

OH

Zip Code

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Westfield Services - SBS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22235**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

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

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

A. Davis, Tom, , ,

Mailing Address 5825 Glen Eagles Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Surety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22115

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

B. Elias, Denise, L., ,

Mailing Address 376 Enos Loomis Street

City  
Pataskala

State  
OH

Zip Code  
43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22121

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

C. England, Michael, S., ,

Mailing Address 2300 Chestnut Drive

City  
Westlake

State  
OH

Zip Code  
44145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Co.

Occupation (for Individual)  
Hospitality Ops Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22122

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

A. Epley, Eric, A., ,

Mailing Address 8659 Bradford Lane

City  
Brecksville

State  
OH

Zip Code  
44141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22123

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

B. Essman, William, S., ,

Mailing Address 5366 Arrowhead Drive

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22124

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

C. Flanigan, Michael, , ,

Mailing Address 389 Stonybrook Circle

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Management

Occupation (for Individual)  
Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22125

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Payroll Deduction

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

200.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Gabel, Lora, L., ,**

Mailing Address 3811 Blackburn Road N.W.

City  
Canton

State  
OH

Zip Code  
44718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
HR- Westfield University

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22127

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

**B. George, Garrett, R., ,**

Mailing Address 7911 Leaview Dr.

City  
Columbus

State  
OH

Zip Code  
43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Westfield Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22129

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**C. Gewirtz, Jennifer, , ,**

Mailing Address PO Box 5001

City  
Westfield Center

State  
OH

Zip Code  
44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield

Occupation (for Individual)  
Claim Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22130

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

150.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Gillentine, Jeffrey, , ,**

Mailing Address Concord Drive

City

Westfield Center

State

OH

Zip Code

44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Management Company

Occupation (for Individual)

Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 09 / 2022

**Transaction ID : SA11AI.22131**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
☐ Payroll Deduction

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

**B. Greenwald, James, P., ,**

Mailing Address 205 North Point Drive

City

Manheim

State

PA

Zip Code

17545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Complex Claims - WC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22136**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
☐ Payroll Deduction

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

**C. Groza, Janice, , ,**

Mailing Address 1101 S. Danbury Circle

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio Farmers Insurance

Occupation (for Individual)

Corporate Giving Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22138**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
☐ Payroll Deduction

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

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

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

A. Hahn, Robyn, R, ,

Mailing Address 551 Koch Street, #4  
PO Box 262

City  
Millersburg

State  
OH

Zip Code  
44654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Marketing Communications Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22139

Amount of Each Receipt this Period

200.00

☐ Memo Item  
☐ Payroll Deduction

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

B. Hassman, Alicia, , ,

Mailing Address 8962 Pomanderwalk  
P.O. Box 66

City

Westfield Center

State

OH

Zip Code

44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Customer Care Center Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22143

Amount of Each Receipt this Period

20.00

☐ Memo Item  
☐ Payroll Deduction

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

C. Hazzard, Alan, J, ,

Mailing Address 2056 E. 4th Street  
Apt. 205

City

Cleveland

State

OH

Zip Code

44115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio Farmers Insurance Company

Occupation (for Individual)

Group Real Estate Ops Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22144

Amount of Each Receipt this Period

50.00

☐ Memo Item  
☐ Payroll Deduction

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

270.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Hickey, Michael, , ,**

Mailing Address 5075 Countyline Turnpike Road

City  
Southington

State  
OH

Zip Code  
44470

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22145**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Payroll Deduction

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

**B. Hopkins, Jodie, , ,**

Mailing Address 2821 Creeley Ct.

City  
Lewis Center

State  
OH

Zip Code  
43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22146**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

**C. Kidd, Mark, , ,**

Mailing Address 380 Ivanhoe Ave.

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22150**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

210.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Kincaid, George, , ,**

Mailing Address P.O. Box 50531

City

Bowling Green

State

KY

Zip Code

42102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio Farmers Insurance Company

Occupation (for Individual)

Material Damage Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22151**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

**B. Kohmann, Joseph, , ,**

Mailing Address Two Park Circle

City

Westfield Center

State

OH

Zip Code

44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Bank

Occupation (for Individual)

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22152**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
☐ Payroll Deduction

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

**C. Kotnik, David, A, ,**

Mailing Address 1254 Bunts Road

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Surety - Bond Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22153**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
☐ Payroll Deduction

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

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

370.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Largent, Edward, , ,**

Mailing Address 14814 Galehouse Road

City  
Doylestown

State  
OH

Zip Code  
44230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Management

Occupation (for Individual)  
Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22156

Amount of Each Receipt this Period

400.00

☐ Memo Item  
Payroll Deduction

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

**B. Lilly, Shelia, , ,**

Mailing Address 562 Barrenwood

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Executive Reg'l Claims Oprn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22157

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**C. Maddox, Mitchell, P, ,**

Mailing Address 12579 Saddle Horn Cir.

City  
Strongsville

State  
OH

Zip Code  
44149

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Risk Services Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22159

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

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

510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. McClaskey, Terry, , ,**

Mailing Address 3940 Chickadee Circle

City  
Stow

State  
OH

Zip Code  
44224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Executive, PL Planning & Developing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22163**

Amount of Each Receipt this Period

120.00

☐ Memo Item  
Payroll Deduction

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

**B. McCormack, Douglas, P, ,**

Mailing Address 63 Knollwood Drive

City  
Hebron

State  
CT

Zip Code  
06248

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Mgr - National Brokers Franchisors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22164**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

**C. Mc Kely, Matthew, T, ,**

Mailing Address 4435 Lexington Ridge Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Risk Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22162**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

190.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Murdick, Jason, A, ,**

Mailing Address 3718 Mariwood Ave.NW

City  
Massillon

State  
OH

Zip Code  
44646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Corporate Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22228**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**B. Nash, Richard, , ,**

Mailing Address 1431 Cobblestone Way

City  
Westlake

State  
OH

Zip Code  
44145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22170**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**C. Neate, Kristine, , ,**

Mailing Address 1024 Cedarwood

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Commercial Lines Training Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22171**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Novosel, Corry, , ,**

Mailing Address 506 Day Star Court

City

Cranberry Twp.

State

PA

Zip Code

16066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio Farmers Insurance Company

Occupation (for Individual)

Property Claims Process Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22173**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction

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

**B. O'Connor, Beth, A, ,**

Mailing Address 13710 54th Ave.  
#309

City

Plymouth

State

MN

Zip Code

55446

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Work Comp Claims Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22174**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction

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

**C. Piekarski, Nick, , ,**

Mailing Address 1369 Stonepointe Drive

City

Wadsworth

State

OH

Zip Code

44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ohio Farmers Insurance

Occupation (for Individual)

PL Financial Reporting Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22177**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction

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

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Piloseno, Anthony, , ,**

Mailing Address 978 Lakeshore Walk

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Unit Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22178**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Payroll Deduction

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

**B. Riveiro, Carlos E, , ,**

Mailing Address 20780 BeachCliff Blvd.

City  
Rocky River

State  
OH

Zip Code  
44116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insur Corp

Occupation (for Individual)  
Small Business Mkt Portfolio UW Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22181**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

**C. Roche, Brian, J, ,**

Mailing Address 278 Kensington Road

City  
Rocky River

State  
OH

Zip Code  
44116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Group Procurement Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22183**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Payroll Deduction

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

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

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Rosenberg, Stuart, , ,**

Mailing Address 6047 Meadow Lake Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22185**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Payroll Deduction

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

**B. Rossander, Michael, , ,**

Mailing Address 1871 Settlers Reserve Way

City  
Westlake

State  
OH

Zip Code  
44145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Corp. Litigation Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22186**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Payroll Deduction

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

**C. Sandor, Frank, , ,**

Mailing Address 529 Caledonia

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22187**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

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

380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

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

**A. Schmidt, Philip, , ,**

Mailing Address 7733 Templin Rd.

City  
BlanchesterState  
OHZip Code  
45107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance CompanyOccupation (for Individual)  
Bond Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22190

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**B. Schumacher, William, , ,**

Mailing Address 5420 Peninsula Drive N.W.

City  
CantonState  
OHZip Code  
44718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield BankOccupation (for Individual)  
Market Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22232

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Payroll Deduction

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

**C. Schwanke, Pete, , ,**

Mailing Address P.O. Box 507

City  
Westfield CenterState  
OHZip Code  
44251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield InsuranceOccupation (for Individual)  
Corporate Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22191

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Payroll Deduction

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

130.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Sheridan, Patrick, , ,**

Mailing Address 3906 Woodbarry

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance

Occupation (for Individual)  
Financial Reporting Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22193**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

**B. Somogyi, Danielle, , ,**

Mailing Address 116 Sarwil Drive North

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Manager Structured Settlements

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22197**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

**C. Souza, Jennifer, L, ,**

Mailing Address 3010 Elmer Drive

City

Brunswick

State

OH

Zip Code

44212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims Legal Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22198**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Sterling, William, , ,**

Mailing Address 909 Clearwood Road

City  
Copley

State  
OH

Zip Code  
44321

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Complex Claims Analyst-Casualty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22199**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
Payroll Deduction

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

**B. Stevens, Jill, , ,**

Mailing Address 507 Weathervane

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Premium Accounting Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22200**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Payroll Deduction

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

**C. Suchan, Michael, A., ,**

Mailing Address 212 Moore Ave.

City  
St. Charles

State  
IL

Zip Code  
60174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Surety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22201**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Payroll Deduction

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

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

240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

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

A. Taylor, Jaclyn, S., ,

Mailing Address 852 Tamwood Drive

City

Canal Fulton

State

OH

Zip Code

44614

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Govt. Rel. Employee Programs Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22202

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

B. Tester, Sara, E., ,

Mailing Address 30 Franklin Drive

City

Doylestown

State

OH

Zip Code

44230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Corporate Hospitality Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22203

Amount of Each Receipt this Period

20.00

☐ Memo Item  
☐ Payroll Deduction

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

C. Tier, Tracey, L., ,

Mailing Address 5230 Linda Drive

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Westfield Group

Occupation (for Individual)

Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22176

Amount of Each Receipt this Period

150.00

☐ Memo Item  
☐ Payroll Deduction

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

200.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Toth, Michael, J.,**

Mailing Address 9701 Weathertop Lane

City  
Chagrin Falls

State  
OH

Zip Code  
44023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Bank

Occupation (for Individual)  
Westfield Bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22233**

Amount of Each Receipt this Period

120.00

☐ Memo Item  
Payroll Deduction

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

**B. Truman, Kathryn, M.,**

Mailing Address 3434 Styx Hill Road

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Bond Claims Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22208**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Payroll Deduction

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

**C. Vonderau, Kevin, P.,**

Mailing Address 12689 Lovers Lane

City  
Spencer

State  
OH

Zip Code  
44275

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Bank

Occupation (for Individual)  
Chief Lending Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22234**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Payroll Deduction

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

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

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Weaver, Becky, K, ,**

Mailing Address 4275 Deer Run Drive

City  
Medina

State  
OH

Zip Code  
44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Casualty Claims Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22213**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

**B. Welsh, Craig, , ,**

Mailing Address 3656 Kennel Avenue

City  
Mountville

State  
PA

Zip Code  
17554

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance Company

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22214**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
☐ Payroll Deduction

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

**C. Wheeler, Melissa, , ,**

Mailing Address 501 Garden Drive

City  
Worthington

State  
OH

Zip Code  
43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Regional Govt. Relations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

**Transaction ID : SA11AI.22216**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

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

210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

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

A. Winkler, Dan, , ,

Mailing Address 9786 Apple Creek

City  
SterlingState  
OHZip Code  
44276FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers InsuranceOccupation (for Individual)  
Claims Litigation Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22217

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

B. Wiswesser, George, , ,

Mailing Address 1420 Sharbrook Drive

City  
WadsworthState  
OHZip Code  
44281FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Management CompanyOccupation (for Individual)  
Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22219

Amount of Each Receipt this Period

150.00

☐ Memo Item  
☐ Payroll Deduction

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

C. Yogmour, Gus, , ,

Mailing Address 2495 Cardigan

City  
AkronState  
OHZip Code  
44333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio Farmers Insurance CompanyOccupation (for Individual)  
Bond Claims Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2022

Transaction ID : SA11AI.22221

Amount of Each Receipt this Period

30.00

☐ Memo Item  
☐ Payroll Deduction

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

210.00

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

5135.00