

# **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. Muth, Kenneth, M, ,**

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)

Media Relations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 26 / 2019

Transaction ID : A0DD08EEB2CF1421FB7E

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Greiter, William, D, ,**

Mailing Address 821 E Washington Ave

City  
Madison

State  
WI

Zip Code  
53703-2935

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

Acqu & Divest Sr Consult

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 26 / 2019

Transaction ID : A2F2FC4287DE54B13A17

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. 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 ▼

280.00

Date of Receipt

07 / 26 / 2019

Transaction ID : A651014CB661D4649A45

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)..... ►

70.00