

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 335

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Political Action Committee

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

A. West, Valerie, E, ,

Mailing Address 1673 Heyford Cir NW

City
KennesawState
GAZip Code
30152-7632FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Tech Mgr, MD PRN Vendor Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	D D	Y Y Y Y
12	08	2017

Transaction ID : EMP201712081319

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. West, Valerie, E, ,

Mailing Address 1673 Heyford Cir NW

City
KennesawState
GAZip Code
30152-7632FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Tech Mgr, MD PRN Vendor Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	D D	Y Y Y Y
12	22	2017

Transaction ID : EMP201712221323

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

c. Westmoreland, Chandler, D, , SRMailing Address 13018 Woodforest Blvd
Ste PCity
HoustonState
TXZip Code
77015-2775FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

IC Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
12	15	2017

Transaction ID : AGT20171215170

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

45.00

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