

**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 53 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Mr. Brent Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3030 N 3rd St
 City Phoenix State AZ Zip Code 85012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CopperPoint Mutual Insurance Company Occupation Chief Financial Officer & Executive Vi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2015
Transaction ID : A8C3C019EAFDA495291A
 Amount of Each Receipt this Period
 20.84

B. Mr. Bruce D. Thomas PFMM
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 594
 City Algona State IA Zip Code 50511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Heartland Mutual Insurance Association Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2015
Transaction ID : ADFB48876669443A59A3
 Amount of Each Receipt this Period
 200.00

C. Ms. Jo Ann M. Kuschel PFMM
 Full Name (Last, First, Middle Initial)
 Mailing Address 545 Harold Meyer Dr
 City New Haven State MO Zip Code 63068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Boeuf & Berger Mutual Insurance Compan Occupation Secretary/Treasurer/ Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015
Transaction ID : A29F964445B9F40439BF
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	720.84
TOTAL This Period (last page this line number only).....▶	