

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

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

FOR LINE NUMBER: PAGE 17 OF 144

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Biesecker, Pamela, A., ,

Mailing Address 808 Yard St
Apt 234

City

Grandview Heights

State

OH

Zip Code

43212-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

SVP, Head of Taxation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : EMP201905301527

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

B. Biesecker, Pamela, A., ,

Mailing Address 808 Yard St
Apt 234

City

Grandview Heights

State

OH

Zip Code

43212-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

SVP, Head of Taxation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 21 / 2019

Transaction ID : EMP201906131522

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

C. Boggs, Todd, A., ,

Mailing Address 910 Teel Branch Rd

City

Huntington

State

WV

Zip Code

25704-9631

FEC 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : AGT2019061419

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

225.00

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