

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

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

FOR LINE NUMBER: PAGE 8 OF 38

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Berven, Mark, A, ,

Mailing Address 9434 Tartan Ridge Blvd

City
Dublin

State
OH

Zip Code
43017-8923

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Pres & COO, NW Prop & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.10

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2020

Transaction ID : EMP20200305616

Amount of Each Receipt this Period

92.30

☐ Memo Item

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

B. Berven, Mark, A, ,

Mailing Address 9434 Tartan Ridge Blvd

City
Dublin

State
OH

Zip Code
43017-8923

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Pres & COO, NW Prop & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.10

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2020

Transaction ID : EMP20200319625

Amount of Each Receipt this Period

92.30

☐ Memo Item

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

C. Blaha, Randall, R, ,

Mailing Address 7590 Bevelhymr Rd

City
New Albany

State
OH

Zip Code
43054-9311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

VP, BSA Retirement Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2020

Transaction ID : EMP202003051275

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

234.60