

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

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

FOR LINE NUMBER: PAGE 22 OF 98

(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 Financial & Investments Political Action Committee

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

A. Case, Joe, , ,

Mailing Address 444 W 6th St

City
Marysville

State
OH

Zip Code
43040-1464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

AVP, Corp Communications & PR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 10 / 2019

Transaction ID : EMP201905021316

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Case, Joe, , ,

Mailing Address 444 W 6th St

City
Marysville

State
OH

Zip Code
43040-1464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

AVP, Corp Communications & PR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2019

Transaction ID : EMP201905161311

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Castina, David, M, ,

Mailing Address 112 Penns Manor Dr

City
Kennett Square

State
PA

Zip Code
19348-4713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Regional Wholesaler-Rtrmt Plns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 10 / 2019

Transaction ID : EMP20190502353

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

96.15

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