

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 State Farm Mutual Automobile Insurance Company Federal Political Action Committee

ADDRESS (number and street) One State Farm Plaza c/o Mark Schwamberger, Treasurer, Bloomington IL 61710-0001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00544817 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2016 through 07 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mark Schwamberger

Signature of Treasurer Mark Schwamberger [Electronically Filed] Date 08 / 17 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="122494.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="292104.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23250.00"/>	<input type="text" value="394450.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="315354.00"/>	<input type="text" value="516944.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21775.00"/>	<input type="text" value="223365.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="293579.00"/>	<input type="text" value="293579.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Report Covering the Period: From: 07 / 01 / 2016 To: 07 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23250.00	393100.00
(ii) Unitemized	0.00	1350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23250.00	394450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23250.00	394450.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	23250.00	394450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23250.00	394450.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	25.00	115.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25.00	115.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21750.00	223250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21775.00	223365.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21775.00	223365.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23250.00	394450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23250.00	394450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	25.00	115.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	25.00	115.00

**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 6 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. John P Antonacci
Full Name (Last, First, Middle Initial)

Mailing Address 315 Tarbert Dr

City West Chester State PA Zip Code 19382-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Vp-Agency/Sales Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : 472266FA649041FFB442

Amount of Each Receipt this Period
 1500.00

Memo Item

B. Zach J Augustyn
Full Name (Last, First, Middle Initial)

Mailing Address 6500 Bayview Dr

City Excelsior State MN Zip Code 55331-9704

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Sales Leader

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 / 11 / 2016

Transaction ID : C0E26AC23C94460CA2F6

Amount of Each Receipt this Period
 500.00

Memo Item

C. Michelle G Brown
Full Name (Last, First, Middle Initial)

Mailing Address 186 Vista Ridge Dr

City South Lebanon State OH Zip Code 45065-8761

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Vp-Agency/Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : 77B45B58077D48F69073

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

**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 7 OF 19
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Janine J Chapa
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Sutton Pl
 City State Zip Code
 Georgetown TX 78628-1991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm Vp-Agency/Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : 749F215DDA0B47F0A3F0
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. Dean M Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Northcrest Ct
 City State Zip Code
 Bloomington IL 61701-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm Associate General Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : B4745806857B4D8C880B
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Paul N Eckley
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 William Dr
 City State Zip Code
 Normal IL 61761-1851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm SR Vp - Investments
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : C1529D9D62C74946A48B
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
TOTAL This Period (last page this line number only).....▶	

**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 8 OF 19
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Mike A Fletcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Cameron Ct
 City Bloomington State IL Zip Code 61704-8330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Leadership Enterprise Dev Assc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 750.00

Date of Receipt 07 / 19 / 2016
Transaction ID : 7308DB8406AC43E293B6
 Amount of Each Receipt this Period 750.00
 Memo Item

B. Matt J Ghrrer
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Cashel Dr
 City Bloomington State IL Zip Code 61704-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Ccc Service Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : D615FFEBB92E4A35BE6B
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Jim R Gottsacker
 Full Name (Last, First, Middle Initial)
 Mailing Address 13646 Fawn Dr
 City Bloomington State IL Zip Code 61705-7830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Vice President & Ciso
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : 418F0ADC1ED6492F8BDB
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**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 9 OF 19
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Kim R Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3645 N Sagewood Cir
 City Mesa State AZ Zip Code 85207-6948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Vpo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : 5F24E16C25524BF8A2DA
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Steve L Horton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1806 Dimmitt Ct
 City Bloomington State IL Zip Code 61704-3422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Associate General Counsel
 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 / 12 / 2016
Transaction ID : B4D78F8AC7904850B6F5
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Brent M Huddleston
 Full Name (Last, First, Middle Initial)
 Mailing Address 4808 Silver Nell Dr
 City Colorado Spgs State CO Zip Code 80908-5309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : C702861D6E284A98B30A
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**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 10 OF 19
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Leonard L Kaigler
 Full Name (Last, First, Middle Initial)
 Mailing Address 27612 Manor Hill Rd
 City Laguna Niguel State CA Zip Code 92677-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Vp-Agency/Sales
 Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2016
Transaction ID : 258BDAA2FF5048D2AFF8
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. Jonathan A Porwick
 Full Name (Last, First, Middle Initial)
 Mailing Address 728 Shackamaxon Dr
 City Westfield State NJ Zip Code 07090-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Sales Leader
 Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : 0364C97051054D018702
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Michael Reid
 Full Name (Last, First, Middle Initial)
 Mailing Address 3710 N Oakland Ave Apt 303
 City Shorewood State WI Zip Code 53211-2282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Farm Occupation Sales Leader
 Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : FCF054CB4BB14536BDB2
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**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 11 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Michaela M Richmond
Full Name (Last, First, Middle Initial)

Mailing Address 10521 N Michigan Ave

City Kansas City State MO Zip Code 64155-8915

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016

Transaction ID : 91BA4043D4974994B3DD

Amount of Each Receipt this Period
 250.00

Memo Item

B. Doug C Smith
Full Name (Last, First, Middle Initial)

Mailing Address 11710 51st Ave NW

City Gig Harbor State WA Zip Code 98332-8201

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Ovp - Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2016

Transaction ID : 3ABF2254C47347148138

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Jill P Spacucello
Full Name (Last, First, Middle Initial)

Mailing Address 6338 Clarendon Hills Rd

City Willowbrook State IL Zip Code 60527-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Occupation Sales Leader

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 / 28 / 2016

Transaction ID : 3B65EFA43A234890A30D

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

**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 12 OF 19
	<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)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Patrick R Warren
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 Windward Way
 City State Zip Code
 Nicholasville KY 40356-8027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm Vp-Agency/Sales
 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 / 28 / 2016
Transaction ID : 1B27EA8D5BC04BC8BE70
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Debbie A Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 93 Horseneck Rd
 City State Zip Code
 Fairfield NJ 07004-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm Sales Leader
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : 4F6B66AC69C94B228F14
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Chad B Witt
 Full Name (Last, First, Middle Initial)
 Mailing Address 6011 Jackpine Rd
 City State Zip Code
 Bloomington IL 61705-7502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State Farm Leadership Development Asoc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : 547ED7A2DFA141918829
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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 13 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
State Farm Mutual Automobile Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lynne M Yowell

Mailing Address 24362 Ron Smith Memorial Hwy

City Hudson	State IL	Zip Code 61748-7553
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm	Occupation Vp, Secretary & Counsel
--------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : C02FCAE34FB84016A181

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	23250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann Wagner for Congress

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Ann Louise Wagner

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2016

Transaction ID : 7CD6171F645A3E7B4BD

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bill Shuster for Congress

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

William F. Shuster

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 7A7355A07067ECA777D

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bill Shuster for Congress

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

William F. Shuster

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 0CA8152881DF49DA889

Amount of Each Disbursement this Period

-1000.00

Memo Item

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

1000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bob Corker for Senate 2018 Inc

Mailing Address 1015 Stonebridge Park Dr

City Franklin State TN Zip Code 37069-4001

Purpose of Disbursement
2018 Primary

Category/
Type

Candidate Name

Bob P. Corker Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

/ /

Transaction ID : 2D6CE36C50EA5BE502C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dold for Congress

Mailing Address PO Box 6312

City Libertyville State IL Zip Code 60048

Purpose of Disbursement
2016 General

Category/
Type

Candidate Name

Robert James Dold Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

/ /

Transaction ID : 981EF3BBD86EB2F64B3

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Elise for Congress

Mailing Address PO Box 500

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement
2016 General

Category/
Type

Candidate Name

Elise M. Stefanik

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

/ /

Transaction ID : 1541191726DD44B406F

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of David Schweikert

Mailing Address 228 S Washington Street
Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
2016 Primary

Candidate Name

David Schweikert

Office Sought: House
 Senate
 President
State: AZ District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2016

Transaction ID : 9D16F429319CC527675

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of John McCain Inc

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2016 General

Candidate Name

John Sidney McCain III

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 3E138E48F2F30664389

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of John McCain Inc

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2016 General

Candidate Name

John Sidney McCain III

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : 929DD9CAD239E78C088

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of John Thune

Mailing Address PO Box 841

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement
2016 General

011

Candidate Name

John Randolph Thune

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : 7A4A3B1CCEC4D52B0D9

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Issa for Congress

Mailing Address PO Box 760

City State Zip Code
Vista CA 92085

Purpose of Disbursement
2016 General

011

Candidate Name

Darrell Edward Issa

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 49

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 1543128AD51D644672E

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Issa for Congress

Mailing Address PO Box 760

City State Zip Code
Vista CA 92085

Purpose of Disbursement
2016 General

011

Candidate Name

Darrell Edward Issa

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 49

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 8A0114C7AF3C09CD7D0

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marcia Fudge for Congress

Mailing Address 3729 Silsby Rd

City University Heights State OH Zip Code 44118

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Marcia Louise Fudge

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : 539422A84A1ACA10C13

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Marco Rubio for Senate 2016

Mailing Address PO Box 661537

City Miami State FL Zip Code 33266

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Marco Antonio Rubio

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2016

Transaction ID : 63A5F3D06010FD93291

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Crapo for US Senate

Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Michael Dean Crapo

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: ID District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : CACD9E35ADCD49C25B0

Amount of Each Disbursement this Period

500.00

Memo Item

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

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Roger Williams for U S Congress Committee

Mailing Address PO Box 91061

City Austin State TX Zip Code 78709-1061

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Roger Williams

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 25

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : 8128F258C428953AE27

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stivers for Congress

Mailing Address 4679 Winterset Dr

City Columbus State OH Zip Code 43220-8113

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Steve Stivers

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2016

Transaction ID : E6DEC147A734FBC3B17

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Wyden for Senate

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Ron L. Wyden

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : 057AA21E19F90506096

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4500.00

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

21750.00