

**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).....▶	