

# **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)

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

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NAME OF COMMITTEE (In Full)

**National Association of Mutual Insurance Companies PAC**

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

**A. Nichols, Cindy, , ,**

Mailing Address 10816 Executive Center Dr

City  
Little Rock

State  
AR

Zip Code  
72211-4354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Auto-Owners Insurance Company

Occupation (for Individual)  
Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

10 / 07 / 2019

**Transaction ID : A15E22AA4812A4B0EB36**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

**B. Orians, Vicki, D., ,**

Mailing Address 501 Front St

City  
Upper Sandusky

State  
OH

Zip Code  
43351-1020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wyandot Mutual Insurance Company

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 02 / 2019

**Transaction ID : AE5C6470F8A31483281B**

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

**C. Owen, Claire, , ,**

Mailing Address 2102 Whitegate Dr

City  
Columbia

State  
MO

Zip Code  
65202-2335

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Columbia Mutual Insurance Company

Occupation (for Individual)  
Associate Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 07 / 2019

**Transaction ID : A59BDD04B5E054D73BF6**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

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

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

410.00