

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)

American Family Mutual Insurance Company, S.I. Federal PAC (AMFAM PAC)

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

A. Stark, Tony, M, ,

Mailing Address 8080 E Central Ave
Ste 340

City
Wichita

State
KS

Zip Code
67206-2389

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

Sales District Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 23 / 2019

Transaction ID : A841EEABAF9CD45D29CF

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Wallace, Richard, L, ,

Mailing Address 4200 Corporate Dr
Ste 120

City

West Des Moines

State
IA

Zip Code
50266-5903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

Sales District Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 23 / 2019

Transaction ID : AE8902A246449405B991

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Stauffacher, Jessica, J, ,

Mailing Address 6000 American Pkw

City

Madison

State
WI

Zip Code
53783-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

American Family Mutual Insurance Compa

Occupation (for Individual)

AmFam Agency Chf Op Ofr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 23 / 2019

Transaction ID : A815B5582784D4A10A47

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

110.00