

# **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)

**Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company**

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

**A. Elias, Denise, L., ,**

Mailing Address 376 Enos Loomis Street

City  
Pataskala

State  
OH

Zip Code  
43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 21 / 2019

Transaction ID : SA11AI.19387

Amount of Each Receipt this Period

240.00

☐ Memo Item  
Payroll deduction

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

**B. Flanigan, Michael, , ,**

Mailing Address 389 Stonybrook Circle

City  
Wadsworth

State  
OH

Zip Code  
44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Management

Occupation (for Individual)  
Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

06 / 21 / 2019

Transaction ID : SA11AI.19395

Amount of Each Receipt this Period

900.00

☐ Memo Item  
Payroll deduction

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

**C. Gabel, Lora, L., ,**

Mailing Address 3811 Blackburn Road N.W.

City  
Canton

State  
OH

Zip Code  
44718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Westfield Group

Occupation (for Individual)  
HR- Westfield University

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 21 / 2019

Transaction ID : SA11AI.19402

Amount of Each Receipt this Period

240.00

☐ Memo Item  
Payroll deduction

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

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

1380.00