

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 38 OF 557

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Zurich Holding Company Of America Inc. Committee For Good Government (Z-PAC, Zurich PAC)**

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

**A. Boyle, David, , ,**

Mailing Address 1299 Zurich Way

City  
Schaumburg

State  
IL

Zip Code  
60196

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Zurich American Ins Co

Occupation (for Individual)

SVPClaimsPropertyWCTechnical Share

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : A2019-3075516**

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

**B. Boyle, Robert, G, ,**

Mailing Address 1299 Zurich Way

City  
Schaumburg

State  
IL

Zip Code  
60196

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Zurich American Ins Co

Occupation (for Individual)

VP Head of Premium Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2019

**Transaction ID : A2019-1515485**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Boyle, Robert, G, ,**

Mailing Address 1299 Zurich Way

City  
Schaumburg

State  
IL

Zip Code  
60196

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Zurich American Ins Co

Occupation (for Individual)

VP Head of Premium Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2019

**Transaction ID : A2019-1678052**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

95.00