

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

ADDRESS (number and street)

One Nationwide Plaza, 1-32-404

Check if different
than previously
reported. (ACC)

Columbus

OH

43215

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00406215

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☒ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2026

through

M M M / D D D / Y Y Y Y Y Y
01 31 2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brewster, Ben, , ,

Signature of Treasurer

Brewster, Ben, , ,

Date

M M M / D D D / Y Y Y Y Y Y
02 13 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y Y 01 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		150593.14
(b) Cash on Hand at Beginning of Reporting Period.....	150593.14	
(c) Total Receipts (from Line 19)	13961.32	13961.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	164554.46	164554.46
7. Total Disbursements (from Line 31)	25500.00	25500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	139054.46	139054.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 01 2026

To:

M M / D D / Y Y Y Y
01 31 2026

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3276.20

3276.20

(ii) Unitemized

10685.12

10685.12

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

13961.32

13961.32

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

13961.32

13961.32

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

13961.32

13961.32

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

13961.32

13961.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	25500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25500.00	25500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25500.00	25500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13961.32	13961.32
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13961.32	13961.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 16
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Aniano, Joseph, , ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
SVP, Investment Management Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP202601151000

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

B. Beman, Bradley, J., ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
Investment Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP202601151030

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

C. Berven, Mark, A, ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
Pres & COO, NW Prop & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115294

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

452.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 16
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Coleman, Joel, Lawrence, ,

Mailing Address 1 Nationwide Plz

City
ColumbusState
OHZip Code
43215-2226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NationwideOccupation (for Individual)
Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2026**Transaction ID : EMP202601151024**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Ginnan, Steven, A, ,

Mailing Address 1 Nationwide Plz

City
ColumbusState
OHZip Code
43215-2226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NationwideOccupation (for Individual)
SVP, Chief Financial Officer - Financi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2026**Transaction ID : EMP20260115120**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Hawley, Craig, Alan, ,

Mailing Address 1 Nationwide Plz

City
ColumbusState
OHZip Code
43215-2226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NationwideOccupation (for Individual)
President & COO, NW Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2026**Transaction ID : EMP20260115987**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.90

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Howard, Mark, S., ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
EVP, Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115952

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Jestice, Kevin, Thomas, ,

Mailing Address Three Nationwide Plaza

City
Columbus

State
OH

Zip Code
43215-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
President, Retirement Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP202601151025

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Mackenzie, Jennifer, Boyd, ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
SVP, Marketing Management - P&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115267

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

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

514.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Mahaffey, Michael, , ,

Mailing Address 1 Nationwide Plz

City
ColumbusState
OHZip Code
43215-2226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

EVP, Chief Customer, Strategy & Innov.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2026**Transaction ID : EMP20260115620**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. O'Brien, Kevin, G, ,

Mailing Address 1 Nationwide Plz

City
ColumbusState
OHZip Code
43215-2226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

SVP, Corporate Development, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2026**Transaction ID : EMP20260115269**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Porteus, Brent, R, ,

Mailing Address 17293 State Route 83

City
CoshoctonState
OHZip Code
43812-9461FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nationwide

Occupation (for Individual)

Member-BOD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 02 / 2026**Transaction ID : RET-FOM-202512293**

Amount of Each Receipt this Period

416.60

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

801.20

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

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

FOR LINE NUMBER: PAGE 10 OF 16
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Snyder, Holly, Renee, ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
President, Nationwide Life

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115213

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

B. Stevenson, Eric, R, ,

Mailing Address Three Nationwide Plaza

City
Columbus

State
OH

Zip Code
43215-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
President, Retirement Solutions - Emer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115658

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Walker, Kirt, A, ,

Mailing Address 1 Nationwide Plz

City
Columbus

State
OH

Zip Code
43215-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 23 / 2026

Transaction ID : EMP20260115321

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

514.60

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

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

FOR LINE NUMBER: PAGE 11 OF 16
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

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

A. Zellers, Jeffrey, W., ,

Mailing Address 5385 Edison St NE

City
Hartville

State
OH

Zip Code
44632-9190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
Member-BOD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 02 / 2026

Transaction ID : RET-FOM-202512292

Amount of Each Receipt this Period

416.60

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

416.60

3276.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name (Last, First, Middle Initial)

A. Balderson For CongressMailing Address PO Box 571
850 Twin Rivers DrCity
ColumbusState
OHZip Code
43216-0571

Purpose of Disbursement

2026 Primary

011

Candidate Name

Balderson, Troy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	3		2	0	2	6		

FEC Identification Number

C C00662650

Transaction ID : C4474E537D!

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Beatty For CongressMailing Address 222 E Town St
FI 2WCity
ColumbusState
OHZip Code
43215-4616

Purpose of Disbursement

2026 General

011

Candidate Name

Beatty, Joyce, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	3		2	0	2	6		

FEC Identification Number

C C00507368

Transaction ID : D7FCE65D76!

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Carey For Congress

Mailing Address PO Box 16032

City
ColumbusState
OHZip Code
43216-6032

Purpose of Disbursement

2026 Primary

011

Candidate Name

Carey, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	9		2	0	2	6		

FEC Identification Number

C C00779603

Transaction ID : 77F7B9995E!

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carey For Congress

Mailing Address PO Box 16032

City
ColumbusState
OHZip Code
43216-6032

Purpose of Disbursement

2026 General

011

Candidate Name

Carey, Mike, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	9		2	0	2	6		

FEC Identification Number

C C00779603

Transaction ID : 9D2C30C17A

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. French Hill For Arkansas

Mailing Address PO Box 7841

City
Little RockState
ARZip Code
72217-7800

Purpose of Disbursement

2026 Primary

011

Candidate Name

Hill, French, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR

District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	3		2	0	2	6		

FEC Identification Number

C C00551275

Transaction ID : 048E4F12A58

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. French Hill For Arkansas

Mailing Address PO Box 7841

City
Little RockState
ARZip Code
72217-7800

Purpose of Disbursement

2026 General

011

Candidate Name

Hill, French, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: AR

District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	3		2	0	2	6		

FEC Identification Number

C C00551275

Transaction ID : 9E427F2C1E

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name (Last, First, Middle Initial)

A. Garbarino For Congress

Mailing Address PO Box 101

City
BayportState
NYZip Code
11705-0101

Purpose of Disbursement

2026 Primary

011

Candidate Name

Garbarino, Andrew, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	6		

FEC Identification Number

C C00729954

Transaction ID : 1412F5D262F

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hern For CongressMailing Address 9521 Riverside Pkwy
Unit 350BCity
TulsaState
OKZip Code
74137-7422

Purpose of Disbursement

2026 Primary

011

Candidate Name

Hern, Kevin, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: OK

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	6		

FEC Identification Number

C C00636092

Transaction ID : 1FAF1C02D0:

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Iowans For Zach Nunn

Mailing Address PO Box 8036

City
Des MoinesState
IAZip Code
50301-8036

Purpose of Disbursement

2026 General

011

Candidate Name

Nunn, Zach, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	6		

FEC Identification Number

C C00784389

Transaction ID : D17DA4A9B:

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jason Smith For Congress

Mailing Address PO Box 1324

City
Cape GirardeauState
MOZip Code
63702-1324

Purpose of Disbursement

2026 General

011

Candidate Name

Smith, Jason, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3		2	0	2	6		

FEC Identification Number

C C00541862

Transaction ID : 3E2887D6168

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Katherine Clark For CongressMailing Address 600 Pennsylvania Ave SE
Unit 15180City
WashingtonState
DCZip Code
20003-7508

Purpose of Disbursement

2026 Primary

011

Candidate Name

Clark, Katherine, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: MA District: 05

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3		2	0	2	6		

FEC Identification Number

C C00541888

Transaction ID : 4831C7F0211

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rulli For Ohio

Mailing Address PO Box 2971

City
YoungstownState
OHZip Code
44511-0971

Purpose of Disbursement

2026 General

011

Candidate Name

Rulli, Michael, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9		2	0	2	6		

FEC Identification Number

C C00858415

Transaction ID : 3F42BFCC9F

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steve Daines For Montana

Mailing Address PO Box 8000

City
BozemanState
MTZip Code
59719-8000

Purpose of Disbursement

2026 Primary

011

Candidate Name

Daines, Steve, , ,

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input checked="" type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: MT

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	6			

FEC Identification Number

C C00491357

Transaction ID : 8655A62FCD

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Walberg For CongressMailing Address PO Box 1362
317 W Washington AveCity
JacksonState
MIZip Code
49204-1362

Purpose of Disbursement

2026 General

011

Candidate Name

Walberg, Tim, , ,

Category/
Type

Office Sought:

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: MI

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	6			

FEC Identification Number

C C00390724

Transaction ID : FE390FC093F

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3500.00

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

25500.00