

**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)	PAGE 26 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)  
**National Association of Mutual Insurance Companies PAC**

**A. Murray, Joel, P., Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 Ames St

City Dedham	State MA	Zip Code 02026
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Norfolk & Dedham Mutual Fire Insurance	Occupation (for Individual) President & CEO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2018

**Transaction ID : ADD4959CC71BD458FAAC**

Amount of Each Receipt this Period  
80.00

Memo Item

**B. Newmister, Nancy, , Ms.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57 Thomas Johnson Dr

City Frederick	State MD	Zip Code 21702
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Frederick Mutual Insurance Company	Occupation (for Individual) President & CEO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2018

**Transaction ID : AABE068AE38EE4131914**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Pinkerton, Mark, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One Mutual Ave

City Frankenmuth	State MI	Zip Code 48787
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Frankenmuth Mutual Insurance Company	Occupation (for Individual) Vice President, Personal Lines
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2018

**Transaction ID : A5200E701E21145C7ACD**

Amount of Each Receipt this Period  
39.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	619.00
<b>TOTAL</b> This Period (last page this line number only).....	