

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

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

FOR LINE NUMBER: PAGE 23 OF 76

(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. Devine, Kevin, , ,

Mailing Address 1911 Edgemont Rd

City
Upper Arlington

State
OH

Zip Code
43212-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
VP, Private Sect RP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2020

Transaction ID : EMP20200514837

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Diem, Klaus, K, ,

Mailing Address 3419 McCammon Chase Dr

City
Lewis Center

State
OH

Zip Code
43035-7247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
SVP, Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2020

Transaction ID : EMP202004301139

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Diem, Klaus, K, ,

Mailing Address 3419 McCammon Chase Dr

City
Lewis Center

State
OH

Zip Code
43035-7247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nationwide

Occupation (for Individual)
SVP, Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2020

Transaction ID : EMP202005141134

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)..... ►

75.00