

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

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

FOR LINE NUMBER: PAGE 59 OF 159

(check only one)

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

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NAME OF COMMITTEE (In Full)

FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK
 INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC

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

A. PFEIL, GLENN A, , ,

Mailing Address 4913A THREADNEEDLE ROAD

City
 GREENVILLE

State
 DE

Zip Code
 19807

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 FARMERS GROUP INC

Occupation (for Individual)
 PRESIDENT, 21ST CA & HI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA144879

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

B. PICKETT, MICHAEL W, , ,

Mailing Address 8105 W 130TH STREET

City
 OVERLAND PARK

State
 KS

Zip Code
 66213

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 FARMERS GROUP INC

Occupation (for Individual)
 AREA SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA144880

Amount of Each Receipt this Period

29.86

☐ Memo Item

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

C. POPP, MAURA C, , ,

Mailing Address 332 MERION AVE.

City
 HADDONFIELD

State
 NJ

Zip Code
 08033

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 FARMERS GROUP INC

Occupation (for Individual)
 DEPUTY GEN COUNSEL 21ST C

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA144883

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

114.86

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