

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 State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

ADDRESS (number and street) One State Farm Plaza c/o Mark Schwamberger, Treasurer, Bloomington IL 61710-0001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 3. IS THIS REPORT NEW (N) OR AMENDED (A) C C00544817 x

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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), 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 in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 12 / 01 / 2017 through 12 / 31 / 2017

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

Type or Print Name of Treasurer

Signature of Treasurer Schwamberger, Mark, , , [Electronically Filed] Date 01 / 18 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		187979.00
(b) Cash on Hand at Beginning of Reporting Period.....	125500.91	
(c) Total Receipts (from Line 19) .....	14000.76	380288.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	139501.67	568267.14
7. Total Disbursements (from Line 31).....	10000.00	438765.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	129501.67	129501.67
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Report Covering the Period: From:  /  /  To:  /  /

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).....	9045.78	360076.30
(ii) Unitemized .....	1454.98	11711.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10500.76	371788.14
(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) .....	10500.76	371788.14
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.....	3500.00	8500.00
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)).....▶	14000.76	380288.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14000.76	380288.14

**DETAILED SUMMARY PAGE**  
of Disbursements

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.....	10000.00	438265.47
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	500.00
(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	500.00
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)) ..	10000.00	438765.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	438765.47

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10500.76	371788.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10500.76	371288.14
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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Refund of 2018 general election contributions for Friends of Jeb Hensarling originally itemized in June and July 2017 reports.

Form/Schedule:  
Transaction ID:

**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 7 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Barnhart, Danny, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 Split Stone Ln  
 City Bellvue State CO Zip Code 80512-6358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2017  
**Transaction ID : 2BF7934A-BC79-4155-**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Brown, Russell, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 Panorama Dr  
 City Medford State OR Zip Code 97504-5638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 4F959594723DDB337243**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Cegon, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2061 Wiltsey Ct SE  
 City Salem State OR Zip Code 97306-6903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 25 / 2017  
**Transaction ID : 42E184F86F8A0847485E**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 8 OF 22
	<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

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NAME OF COMMITTEE (In Full)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

**A. Dill, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 Barker Ave  
 PH 1407  
 City White Plains State NY Zip Code 10601-1575  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2017  
**Transaction ID : 46F78A0A4CAA2AB80C19**  
 Amount of Each Receipt this Period  
 83.32  
 Memo Item

**B. Downie, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3211 NW Miller Rd  
 City Portland State OR Zip Code 97229-8566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2017  
**Transaction ID : 4920882BC331A671C961**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

**C. Edmonds, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18043 SW Scholls Ferry Rd  
 City Beaverton State OR Zip Code 97007-8821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 4BADAD36E854E0C7832C**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.82
<b>TOTAL</b> This Period (last page this line number only).....	



**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 9 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Engle, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 Powell Dr  
 City Bloomington State IL Zip Code 61704-4698  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 43D48C667E5F1D2CB29D**  
 Amount of Each Receipt this Period  
 83.32  
 Memo Item

**B. Fletcher, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Cameron Ct  
 City Bloomington State IL Zip Code 61704-8330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Enterprise Tech Exec - P&C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 4BA3A219151480A91EE7**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Frati, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 840 Cross Creek Dr  
 City Roseburg State OR Zip Code 97471-9839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2017  
**Transaction ID : 4EA9A0BAAD30D454451A**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	233.32
<b>TOTAL</b> This Period (last page this line number only).....	

**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 10 OF 22
	<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	

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Furer, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 5160

City Salem	State OR	Zip Code 97304-0160
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 12 / 01 / 2017  
**Transaction ID : 49B2B3E01B883230F1AA**

Amount of Each Receipt this Period  
 50.00

Memo Item

**B. Gourley, Josh, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5921 Landmark Ln

City Eugene	State OR	Zip Code 97402-7570
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 12 / 29 / 2017  
**Transaction ID : 488F8355B6D5BBEE4CC3**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. Guilliams, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 Colt Cir

City Bellville	State OH	Zip Code 44813-1290
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Sales Leader
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 12 / 27 / 2017  
**Transaction ID : 4F42955ED7FD2B98E3C6**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 11 OF 22
	<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	

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NAME OF COMMITTEE (In Full)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

**A. Higa-Seaver, Tammy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Kilborn Ct  
 City Bloomington State IL Zip Code 61704-7001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Ccc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 31 / 2017  
**Transaction ID : 4DAB9F0349308EA9386C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Holt, Aubrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4125 SW Dosch Rd  
 City Portland State OR Zip Code 97239-1353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 4BE5B966BCADA6E3E24E**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Johnson, Debi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 913 Dunerose Ct  
 City Vacaville State CA Zip Code 95687-7702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 291.62

Date of Receipt 12 / 02 / 2017  
**Transaction ID : 4EB8A1D8F60B93CF2018**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	216.66
<b>TOTAL</b> This Period (last page this line number only).....	

**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 12 OF 22
	<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	

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NAME OF COMMITTEE (In Full)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

**A. Kazi, Awan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18994 Bryant Rd  
 City Lake Oswego State OR Zip Code 97034-7222  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 625.00

Date of Receipt 12 / 30 / 2017  
 Transaction ID : 4682996D786B8D9D8862  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**B. Kindred, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2004 N Towanda Barnes Rd  
 City Bloomington State IL Zip Code 61705-2800  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Hr  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1250.00

Date of Receipt 12 / 28 / 2017  
 Transaction ID : 35D5411F203A4A79B3D4  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**C. Manning, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2822 NW Birkendene St  
 City Portland State OR Zip Code 97229-8081  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 400.00

Date of Receipt 12 / 09 / 2017  
 Transaction ID : 40298597396B51747371  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 1475.00  
**TOTAL** This Period (last page this line number only).....

**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 13 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. McDaniel, Damy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15926 Butterwort Cir

City Parker	State CO	Zip Code 80134-7598
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

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  
 12 / 26 / 2017

**Transaction ID : E5DD5CEE-94CB-4300-**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B. Miner, Jane Wright, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 Pheasant Xing

City Glastonbury	State CT	Zip Code 06033-2857
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Agency Administration Leader
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2017

**Transaction ID : 48C6AC1B238B31CE1289**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. Nicholson, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 Highcrest Dr

City Medford	State OR	Zip Code 97504-9351
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017

**Transaction ID : 40AEBD4D8B70B87B6F74**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 14 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Pechan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21411 Hawthorne Arbor Ln  
 City Downs State IL Zip Code 61736-9656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 12 / 13 / 2017  
**Transaction ID : B8BED39C1EC145AAB95A**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**B. Petersen, Randy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2162 Heather Ridge Dr  
 City Normal State IL Zip Code 61761-9673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp - Life/Health Actuarial  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 5F8D8AEF-2FE2-4B06-**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Sanchez, Christina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41764 Corte Lara  
 City Temecula State CA Zip Code 92592-6314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 01 / 2017  
**Transaction ID : 49FBB3B36B24972A0ED3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4550.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 15 OF 22
	<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	

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Schreder, Joy L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1630 Locust Hills Pl  
 City Wayzata State MN Zip Code 55391-1972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Area Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2017  
**Transaction ID : 460BAB3369AA2AB36F43**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Spears, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2021 SW Main St Unit 36  
 City Portland State OR Zip Code 97205-1543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 466E966F79EDC34D293E**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Summers, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2822 NW Birkendene St  
 City Portland State OR Zip Code 97229-8081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Sales Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 24 / 2017  
**Transaction ID : 401E8DF0319F434F363A**  
 Amount of Each Receipt this Period  
 41.66  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	441.66
<b>TOTAL</b> This Period (last page this line number only).....	

**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 16 OF 22
	<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	

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Szymankowski, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 E US Highway 24

City Woodland Park	State CO	Zip Code 80863-3141
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017

**Transaction ID : 275A486B-7436-484C-**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Terry, Victor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6008 Southwind Ln

City McKinney	State TX	Zip Code 75070-4871
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm	Occupation (for Individual) Area Vice President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 208.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017

**Transaction ID : 4741BEAFCD A56BD80757**

Amount of Each Receipt this Period  
 208.32

Memo Item

**C. Waterman, Analene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8749 Darley Rd SE

City Aumsville	State OR	Zip Code 97325-9751
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) State Farm Agent
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2017

**Transaction ID : 483D8ADDB8BC0002F4C8**

Amount of Each Receipt this Period  
 125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	583.32
<b>TOTAL</b> This Period (last page this line number only).....	



**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 17 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Williams, Garrett, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 Leland St  
 City Bloomington State IL Zip Code 61701-5643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Avp-Enterprise Comp & Ethics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2017  
**Transaction ID : 42E5ABFED92737129102**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**B. Wimmer, Russ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1082  
 City Medford State OR Zip Code 97501-0079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 460E81FF04C7C25F576E**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Wold, Rory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 Martin Dr  
 City Medford State OR Zip Code 97501-8137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) State Farm Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 4BF8BDB31268C70CA5E8**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	9045.78

**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 18 OF 22
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)**

**A. Friends Of Jeb Hensarling**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 820504

City Dallas	State TX	Zip Code 75382-0504
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370650

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2017

**Transaction ID : 4C272C575E891DC4C4C**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
 Refund of 2018 General election originally itemized in June 2017.

**B. Friends Of Jeb Hensarling**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 820504

City Dallas	State TX	Zip Code 75382-0504
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370650

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2017

**Transaction ID : 5228E8016C977A00FE8**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
 Refund of 2018 General election originally itemized in July 2017.

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	3500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

**A. Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement 2020 Primary

Candidate Name  
Capito, Shelley, Moore, ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: WV District:

Date of Disbursement: 12 / 07 / 2017

FEC Identification Number: C00539825  
Transaction ID : 1E0F5E09A5I  
Amount of Each Disbursement this Period: 500.00

Category/Type: 011

Memo Item

**B. Committee To Re-Elect Henry Hank Johnson**

Full Name (Last, First, Middle Initial)  
Mailing Address 4153 Flat Shoals Parkway Suite 322, Building C, 2Nd Floor

City Decatur State GA Zip Code 30034

Purpose of Disbursement 2018 Primary

Candidate Name  
Johnson, Henry, C., , Jr.

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: GA District: 04

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C00418293  
Transaction ID : 6D097D1EC5I  
Amount of Each Disbursement this Period: 500.00

Category/Type: 011

Memo Item

**C. Cummings For Congress Campaign Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1631

City Baltimore State MD Zip Code 21203

Purpose of Disbursement 2018 Primary

Candidate Name  
Cummings, Elijah, E., ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MD District: 07

Date of Disbursement: 12 / 05 / 2017

FEC Identification Number: C00310318  
Transaction ID : D350DA5BEI  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

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

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

2000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Full Name (Last, First, Middle Initial) <b>A. Friends Of David Schweikert</b>		Date of Disbursement MM / DD / YYYY 12 / 14 / 2017
Mailing Address PO Box 15785		FEC Identification Number C00540617 <b>Transaction ID : 91C52EA0C0</b> Amount of Each Disbursement this Period 1000.00
City Phoenix	State AZ	Zip Code 85060-5785
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Schweikert, David, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 06	

Full Name (Last, First, Middle Initial) <b>B. Friends Of John Thune</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2017
Mailing Address PO Box 841		FEC Identification Number C00409581 <b>Transaction ID : FC2C260B94I</b> Amount of Each Disbursement this Period 1500.00
City Sioux Falls	State SD	Zip Code 57101
Purpose of Disbursement 2022 Primary		011 Category/ Type
Candidate Name <b>Thune, John, Randolph, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District:	

Full Name (Last, First, Middle Initial) <b>C. Kinzinger For Congress</b>		Date of Disbursement MM / DD / YYYY 12 / 04 / 2017
Mailing Address PO Box 2365		FEC Identification Number C00458877 <b>Transaction ID : 7A309A932D</b> Amount of Each Disbursement this Period 1000.00
City Ottawa	State IL	Zip Code 61350-6965
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Kinzinger, Adam, Daniel, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 16	

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

3500.00

**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 Page

FOR LINE NUMBER:  
(check only one)

<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)

State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

Full Name (Last, First, Middle Initial)

**A. Loudermilk For Congress**

Mailing Address PO Box 447

City  
Cassville

State  
GA

Zip Code  
30123

Purpose of Disbursement  
2018 Primary

011

Candidate Name

Loudermilk, Barry, Dean, ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: GA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2017			

FEC Identification Number

C C00543892

Transaction ID : 2898373665B

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark Pocan For Congress**

Mailing Address PO Box 327

City  
Madison

State  
WI

Zip Code  
53701

Purpose of Disbursement  
2018 Primary

011

Candidate Name

Pocan, Mark, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: WI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2017			

FEC Identification Number

C C00502179

Transaction ID : B3186D81A9I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Perdue For Senate**

Mailing Address PO Box 12077

City  
Atlanta

State  
GA

Zip Code  
30355-2077

Purpose of Disbursement  
2020 Primary

011

Candidate Name

Perdue, David, Alfred, , Jr.

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2017			

FEC Identification Number

C C00547570

Transaction ID : 81523FD2D2

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC)

**A. Poliquin For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 50

City: Oakland State: ME Zip Code: 04963

Purpose of Disbursement: 2018 Primary  
Candidate Name: Poliquin, Bruce, Lee, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: ME District: 02

Date of Disbursement: 12 / 14 / 2017

FEC Identification Number: C00518654  
Transaction ID: 0C435C27001  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**B. Roskam For Congress Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 713

City: Wheaton State: IL Zip Code: 60187

Purpose of Disbursement: 2018 General  
Candidate Name: Roskam, Peter, James, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: IL District: 06

Date of Disbursement: 12 / 06 / 2017

FEC Identification Number: C00410969  
Transaction ID: 45876D985BE  
Amount of Each Disbursement this Period: 500.00

Category/Type: 011

Memo Item

**C. Roskam For Congress Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 713

City: Wheaton State: IL Zip Code: 60187

Purpose of Disbursement: 2018 Primary  
Candidate Name: Roskam, Peter, James, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: IL District: 06

Date of Disbursement: 12 / 06 / 2017

FEC Identification Number: C00410969  
Transaction ID: 5145C068F9I  
Amount of Each Disbursement this Period: 500.00

Category/Type: 011

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00