

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

ADDRESS (number and street) 2600 South River Road

Check if different than previously reported. (ACC) Des Plaines IL 60018 3286

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00066472

3. IS THIS REPORT NEW (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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2011 through 04 30 2011

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 June Holmes

Signature of Treasurer Electronically Filed by June Holmes Date 05 20 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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="2011"/>		85732.68
(b) Cash on Hand at Beginning of Reporting Period	93640.89	
(c) Total Receipts (from Line 19)	55740.01	217248.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	149380.90	302980.90
7. Total Disbursements (from Line 31)	47500.00	201100.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	101880.90	101880.90
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:

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

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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)	31011.96	143550.56
(ii) Unitemized	4728.05	30208.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35740.01	173759.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	20000.00	43488.83
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	55740.01	217248.22
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 Transfer (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))	55740.01	217248.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	55740.01	217248.22

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	47500.00	197500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	3600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	47500.00	201100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47500.00	201100.00

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)	55740.01	217248.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55740.01	217248.22
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: (check only one)	PAGE 6 / 39
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Thomas L. Richardson	Date of Receipt MM / DD / YYYY 04 / 04 / 2011
	Mailing Address 6601 Elton Ave.	Transaction ID: 33142580
	City State Zip Code Las Vegas NV 89107-2479	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer California Casualty Management Company	Occupation Division Claims Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) George D Dufala	Date of Receipt MM / DD / YYYY 04 / 05 / 2011
	Mailing Address 4896 Thoroughbred Loop	Transaction ID: 33142581
	City State Zip Code Erie PA 16506-6608	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Erie Insurance Group	Occupation Executive Vice President - Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Michael S Zavasky	Date of Receipt MM / DD / YYYY 04 / 05 / 2011
	Mailing Address 4156 Vassar Dr.	Transaction ID: 33142582
	City State Zip Code Erie PA 16506-3738	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Erie Insurance Group	Occupation Exec Vice President Insurance Operatio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2300.00
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: PAGE 7 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Mr Jonathan A. Brown

Mailing Address 9053 Tarmac Way

City State Zip Code
Fair Oaks CA 95628-8144

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

Name of Employer Occupation
California Casualty Group Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2011

Transaction ID: 33142583

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Marcia A Dall

Mailing Address 33 Old Stone Xing

City State Zip Code
West Hartford CT 06117-1854

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

Name of Employer Occupation
Erie Insurance Group Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2011

Transaction ID: 33159817

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
T Mike McCormick

Mailing Address 14245 W 138th Ct

City State Zip Code
Olathe KS 66062-5881

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

Name of Employer Occupation
California Casualty Group Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2011

Transaction ID: 33159818

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► **1640.00**

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: PAGE 8 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Mr. John B. Millet, Jr.
Mailing Address 2175 Beech Grove Place
City Utica State NY Zip Code 13501-1797
FEC ID number of contributing federal political committee. **C**
Name of Employer Utica First Insurance Company Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 04 / 07 / 2011
Transaction ID: 33161680
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Kirk B. Hinman
Mailing Address 6402 Karlen Road
City Rome State NY Zip Code 13440-7452
FEC ID number of contributing federal political committee. **C**
Name of Employer Utica First Insurance Company Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 04 / 07 / 2011
Transaction ID: 33161681
Amount of Each Receipt this Period 275.00

C. Full Name (Last, First, Middle Initial)
Deborah Pryce
Mailing Address 2920 S. Dorchester Road
City Columbus State OH Zip Code 43221-3038
FEC ID number of contributing federal political committee. **C**
Name of Employer Westfield Group Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 04 / 07 / 2011
Transaction ID: 33161682
Amount of Each Receipt this Period 240.00

SUBTOTAL of Receipts This Page (optional) ► 815.00
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 9 / 39
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Mr. Beau Brown

Mailing Address 187 Rinconada Avenue

City Palo Alto State CA Zip Code 94301-3726

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

Name of Employer California Casualty Group Occupation President and CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 11 / 2011

Transaction ID: 33161684

Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
Richard R Griffith

Mailing Address 12 Viburnum Place

City New Hartford State NY Zip Code 13413-3931

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

Name of Employer Utica First Insurance Company Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 11 / 2011

Transaction ID: 33161700

Amount of Each Receipt this Period 275.00

C. Full Name (Last, First, Middle Initial)
Ms. Karen Murphy

Mailing Address 1742 Seagull Court Apt 305

City Reston State VA Zip Code 20194-4309

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

Name of Employer Medmarc Insurance Group Occupation Sr Vice President & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 04 / 13 / 2011

Transaction ID: 33261493

Amount of Each Receipt this Period 325.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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 10 / 39
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Alan R Leist, JR

Mailing Address 114 Business Park Drive

City State Zip Code
Utica NY 13502-6302

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

Name of Employer
Utica First Insurance Company

Occupation
Chairman of the Board

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2011

Transaction ID: 33261494

Amount of Each Receipt this Period
240.00

B.

Full Name (Last, First, Middle Initial)
Anthony J. Trivella

Mailing Address 6 St. Michaels Court

City State Zip Code
Avon CT 06001-3187

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

Name of Employer
Hartford Steam Boiler Group

Occupation
Exec Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 15 / 2011

Transaction ID: 33261495

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. L. Michael Fitzgerald

Mailing Address 3557 Neal's Gulf Road

City State Zip Code
New Hartford NY 13413-5720

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

Name of Employer
Utica First Insurance Company

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 15 / 2011

Transaction ID: 33261496

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **740.00**

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 11 / 39
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. John Zawadzki	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 107 Gadwall Ln	Transaction ID: 33261497
	City State Zip Code Manlius NY 13104-9395	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Utica First Insurance Company	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) Francis A Stockwell, III	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5517 Shooter Hill Lane	Transaction ID: 33284832
	City State Zip Code Fairfax VA 22032-3030	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Medmarc Insurance Group	Occupation Chief Underwriting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Ms. Karen S. Fulton	Date of Receipt MM / DD / YYYY 04 / 13 / 2011
	Mailing Address 200 Country Lane	Transaction ID: 33284833
	City State Zip Code Langhorne PA 19047-2110	Amount of Each Receipt this Period 2700.00
	FEC ID number of contributing federal political committee. C	
Name of Employer ARI Mutual Insurance Company	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

SUBTOTAL of Receipts This Page (optional)	3215.00
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: PAGE 12 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Patrick O Lynch

Mailing Address 4000 West 114th Street Suite 3000

City State Zip Code
Leawood KS 66211-2674

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

Name of Employer Occupation
California Casualty Group Vice President Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2011

Transaction ID: 33284834

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Nigel J. Griffey

Mailing Address 19073 Quiver Ridge Drive

City State Zip Code
Leesburg VA 20176-8447

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

Name of Employer Occupation
Medmarc Insurance Group CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2011

Transaction ID: 33284835

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard F. Russell

Mailing Address 6295 Bloomfield Glens

City State Zip Code
West Bloomfield MI 48322-2512

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

Name of Employer Occupation
Amerisure Companies President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2011

Transaction ID: 33284839

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ▶ **5600.00**

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: PAGE 13 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Michael L. Browne

Mailing Address 1900 Hollow Road

City State Zip Code
Collegeville PA 19426-1451

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

Name of Employer Harleysville Insurance Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: 33284842

Amount of Each Receipt this Period
3600.00

B.

Full Name (Last, First, Middle Initial)
Donald Applegate

Mailing Address 9 Hickory Drive

City State Zip Code
Columbus NJ 08022-2235

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

Name of Employer Farmers Insurance Company of Flemington Occupation President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: 33284843

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jerome G. Rekowski

Mailing Address 1993 Skyline Drive

City State Zip Code
Stoughton WI 53589-3253

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

Name of Employer American Family Insurance Group Occupation Vice President-Commercial and Farm-Ran

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: 33284924

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶ **4200.00**

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: PAGE 14 / 39
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Peter C Gunder

Mailing Address 4505 Nina Lane

City Madison State WI Zip Code 53783-0001

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

Name of Employer American Family Insurance Group Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 26 / 2011

Transaction ID: 33284925

Amount of Each Receipt this Period 600.00

B.

Full Name (Last, First, Middle Initial)
Thomas E Workman

Mailing Address Bridge Tower Place
401 East 60th St. Suite 26B

City New York State NY Zip Code 10022-1592

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

Name of Employer Westfield Group Occupation Insurance Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 26 / 2011

Transaction ID: 33284926

Amount of Each Receipt this Period 600.00

C.

Full Name (Last, First, Middle Initial)
Gerry Benusa

Mailing Address 4414 Longmeadow Court

City Peoria State IL Zip Code 61615-8928

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

Name of Employer American Family Insurance Group Occupation Illinois Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 26 / 2011

Transaction ID: 33284927

Amount of Each Receipt this Period 275.00

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: PAGE 15 / 39
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Mr. Bradley J. Gleason

Mailing Address 3727 Nelson Lane

City State Zip Code
Deerfield WI 53531-9707

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

Name of Employer Occupation
American Family Insurance Group Exec Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2011

Transaction ID: 33284932

Amount of Each Receipt this Period
310.00

B. Full Name (Last, First, Middle Initial)
Ms. Fongyee Judy Jao

Mailing Address 92 Park Avenue

City State Zip Code
Mountain View CA 94041

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

Name of Employer Occupation
California Casualty Group Vice President and Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2011

Transaction ID: 33285055

Amount of Each Receipt this Period
240.00

C. Full Name (Last, First, Middle Initial)
Brian S Kern

Mailing Address 8118 Poplar Hill Drive

City State Zip Code
Clinton MD 20735-3115

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

Name of Employer Occupation
Medmarc Insurance Group Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2011

Transaction ID: 33285056

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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: PAGE 16 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr John Fitts

Mailing Address 6300 Wilson Mills Road

City State Zip Code
Mayfield Village OH 44143-2109

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

Name of Employer Progressive Casualty Insurance Company
Occupation Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: 33285057

Amount of Each Receipt this Period
240.00

B.

Full Name (Last, First, Middle Initial)
Mr Hong Chen

Mailing Address 224 Thatcher Lane

City State Zip Code
Foster City CA 94404-3949

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

Name of Employer California Casualty Group
Occupation Vice President Actuarial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: 33285058

Amount of Each Receipt this Period
240.00

C.

Full Name (Last, First, Middle Initial)
Steve Reagan

Mailing Address 4700 78th Street

City State Zip Code
Urbandale IA 50322-1031

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

Name of Employer GuideOne Insurance
Occupation AVP Corporate Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: 33285059

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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: PAGE 17 / 39
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Kermit M Starnes

Mailing Address 70 Corporate Hill Dr Suite 101

City State Zip Code
Saint Charles MO 63301-3750

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

Name of Employer Occupation
Lutheran Trust President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: 33285060

Amount of Each Receipt this Period
240.00

B.

Full Name (Last, First, Middle Initial)
Ms. Susan J Insley

Mailing Address 4972 Tempe Road

City State Zip Code
Powell OH 43065-8061

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

Name of Employer Occupation
Westfield Group Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: 33285102

Amount of Each Receipt this Period
480.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert Joyce

Mailing Address 6478 Foxglove Drive

City State Zip Code
Medina OH 44256-7861

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

Name of Employer Occupation
Westfield Group Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: 33285104

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2720.00**

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: PAGE 18 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Dominick Carbone

Mailing Address 2606 Edmonds Road

City Boonville State NY Zip Code 13309-5105

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

Name of Employer Utica First Insurance Company Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 29 / 2011
Transaction ID: 33285297
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Barbara K Gurnett

Mailing Address 13850 Horsetail Terrace

City Colorado Springs State CO Zip Code 80921-7606

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

Name of Employer California Casualty Group Occupation 1st Vice President Chief Learning Offi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 04 / 29 / 2011
Transaction ID: 33285298
Amount of Each Receipt this Period: 480.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory V. Ostergren

Mailing Address Corporate Centre
1949 East Sunshine

City Springfield State MO Zip Code 65899-0001

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

Name of Employer American National Property and Casualty Occupation Chairman, President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 04 / 30 / 2011
Transaction ID: PR1456193325931
Amount of Each Receipt this Period: 300.00
P/R Deduction (\$300.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **1030.00**

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 19 / 39
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Ms. June T. Holmes

Mailing Address 409 S. Vine

City State Zip Code
Park Ridge IL 60068-4145

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

Name of Employer Property Casualty Insurers Association
Occupation Treasurer & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR1456336825931

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Ms. Joanne M. Orfanos

Mailing Address 2104 Butternut Lane

City State Zip Code
Northbrook IL 60062-6608

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

Name of Employer Property Casualty Insurers Association
Occupation Sr VP Membership & Marketing Communica

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR1456395525931

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr. Scott A. Joyner

Mailing Address 57 E. Delaware #2105

City State Zip Code
Chicago IL 60611-1476

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

Name of Employer Property Casualty Insurers Association
Occupation Vice President Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 852.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR1456541525931

Amount of Each Receipt this Period
213.00

P/R Deduction (\$106.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **613.00**

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: PAGE 20 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Ms. Susan G. Vincent

Mailing Address 1787 Sheffield

City Birmingham State MI Zip Code 48009-7224

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

Name of Employer Amerisure Companies Occupation VP-General Counsel & Sec.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456707725931

Amount of Each Receipt this Period 150.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. Timothy J. Quinn

Mailing Address 5749 Old US 23

City Fenton State MI Zip Code 48430-9372

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

Name of Employer Amerisure Companies Occupation VP-Treasury

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456707825931

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. David B. Hostetter

Mailing Address 37154 Weymouth

City Livonia State MI Zip Code 48152-4096

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

Name of Employer Amerisure Companies Occupation VP-Und & Prod Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456707925931

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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: PAGE 21 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Ms. Debra Szmagaj

Mailing Address 1267 Old Milford Farms

City Milford State MI Zip Code 48381-3373

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

Name of Employer Amerisure Companies Occupation VP Bus. Application Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456708125931

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. Don A. Smith

Mailing Address 54021 Trent River Drive

City Shelby Township State MI Zip Code 48315-1438

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

Name of Employer Amerisure Companies Occupation VP-Claims

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456708225931

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Hoeg

Mailing Address 17950 Cranbrook Court

City Northville State MI Zip Code 48167-4335

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

Name of Employer Amerisure Companies Occupation Executive VP-COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456708425931

Amount of Each Receipt this Period 150.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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 22 / 39
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Roy D Kinnan		Date of Receipt
	Mailing Address 46139 Galway Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Novi	MI	48374-3972
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456708925931
Name of Employer Amerisure Companies		Occupation SR VP-CFO & Treasurer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="75.00"/>
			P/R Deduction (\$25.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Graf		Date of Receipt
	Mailing Address 45000 Drocton		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Novi	MI	48375-3802
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456720625931
Name of Employer Amerisure Companies		Occupation VP-Investments	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	<input type="text" value="150.00"/>
			P/R Deduction (\$50.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Mr. Michael Dieterle		Date of Receipt
	Mailing Address 47202 White Pines Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Novi	MI	48374-3697
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456721825931
Name of Employer Amerisure Companies		Occupation VP-Fld Mkt & Undrwrtng	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	<input type="text" value="120.00"/>
			P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="345.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Michael F. Gilhooly

Mailing Address 12135 Flambeau Drive

City Palos Heights State IL Zip Code 60463-1659

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

Name of Employer Property Casualty Insurers Association Occupation Director State Political Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1456768825931

Amount of Each Receipt this Period 60.00

P/R Deduction (\$30.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr. Todd B. Ruthruff

Mailing Address 14615 Tudor Chase Drive

City Tampa State FL Zip Code 33626-3338

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

Name of Employer Amerisure Companies Occupation VP - Agency Ser Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1566733125931

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. Mark F. Fox

Mailing Address 29911 Robert

City Livonia State MI Zip Code 48150-3045

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

Name of Employer Amerisure Companies Occupation VP Special Risk Undrwrng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1578285425931

Amount of Each Receipt this Period 90.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 225.00

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: PAGE 24 / 39
(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

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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Ms. Ann W. Spragens

Mailing Address 5510 Chase Avenue

City Downers Grove State IL Zip Code 60515-4268

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

Name of Employer Property Casualty Insurers Association
Occupation Sr Vice President, Secretary & General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2011
Transaction ID: PR1632493225931
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr. Benjamin J. McKay

Mailing Address 5317 Yorktown Blvd

City Arlington State VA Zip Code 22207-1528

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

Name of Employer Property Casualty Insurers Association
Occupation Sr. VP Federal Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1033.36

Date of Receipt 04 / 30 / 2011
Transaction ID: PR1695170225931
Amount of Each Receipt this Period 208.34
P/R Deduction (\$104.17 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr Thomas R. Litjen

Mailing Address 3917 Barcroft Mews Court

City Falls Church State VA Zip Code 22041-1235

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

Name of Employer Property Casualty Insurers Association
Occupation VP Federal Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2011
Transaction ID: PR1790384225931
Amount of Each Receipt this Period 208.34
P/R Deduction (\$104.17 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **516.68**

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 25 / 39
	<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	

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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr Joe Woods	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 2100 Plumbrook	Transaction ID: PR1812180425931
	City State Zip Code Austin TX 78746-6232	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Asst VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) D. Kenton Brine	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 1500 Water Street SW No 2	Transaction ID: PR1829855025931
	City State Zip Code Olympia WA 98501-2295	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Asst. VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Mr. Kurt D Gallinger	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 26777 Halsted Road	Transaction ID: PR2020349225931
	City State Zip Code Farmington Hills MI 48331-3577	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$60.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation VP Gov Rel & Counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	300.00
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 26 / 39
	<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	

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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Debra Even	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 26777 Halsted	Transaction ID: PR2059592225931
	City State Zip Code Farmington Hills MI 48331-3577	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation AVP, Credit & Collection	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Vincent T Donnelly	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 174 Meadow View Lane	Transaction ID: PR2151653925931
	City State Zip Code Lansdale PA 19446-5931	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer PMA Insurance Group	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Leo M Orth, Jr	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 14614 Wilden Drive	Transaction ID: PR2194743425931
	City State Zip Code Urbandale IA 50323-2070	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$60.00 Monthly)
Name of Employer FBL Financial Group	Occupation VP Research and Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	285.00
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: PAGE 27 / 39
(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
David A. Sampson

Mailing Address 2435 Luckett Ave

City State Zip Code
Vienna VA 22180-6819

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

Name of Employer Property Casualty Insurers Association
Occupation President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1420.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR2228336725931

Amount of Each Receipt this Period
355.00

P/R Deduction (\$177.50 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Deirdre Manna

Mailing Address 1548 Maple Avenue

City State Zip Code
Northbrook IL 60062-5475

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

Name of Employer Property Casualty Insurers Association
Occupation VP Industry, Regulatory and Political

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR2247336325931

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Marguerite Tortorello

Mailing Address 4711 North Kenmore

City State Zip Code
Chicago IL 60640-5980

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

Name of Employer Property Casualty Insurers Association
Occupation Sr Vice President, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR2357924925931

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **755.00**

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:	PAGE 28 / 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Paul Blume, JR	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 430 W. sheridan Place	Transaction ID: PR2400795625931
	City State Zip Code Lake Bluff IL 60044-2327	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Sr VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.	Full Name (Last, First, Middle Initial) Micaela Isler	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 980 Los Angeles NE	Transaction ID: PR2485632325931
	City State Zip Code Atlanta GA 30306-3604	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Regional Mgr State Government Relation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) James E Hohmann	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 54 Hillburn Lane	Transaction ID: PR2540032325931
	City State Zip Code North Barrington IL 60010-6975	Amount of Each Receipt this Period 327.28
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$327.28 Monthly)
Name of Employer FBL Financial Group	Occupation Chief Executive Offiver	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 981.84	

SUBTOTAL of Receipts This Page (optional)	627.28
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:		PAGE 29 / 39	
	(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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Michael F. Gerik		Date of Receipt
	Mailing Address PO Box 23650		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Waco	TX	76702-3650
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Texas Farm Bureau Group		Occupation Chief Financial Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Transaction ID: PR2541307125931
			Amount of Each Receipt this Period <input type="text" value="240.00"/>
			P/R Deduction (\$120.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="31011.96"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
GEICO PAC

Mailing Address Government Employees Ins. Co.
1 Geico Plaza

City State Zip Code
Washington DC 20076

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: 33161708

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
EriePAC-Federal

Mailing Address P.O. Box 1699

City State Zip Code
Erie PA 16530

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: 33161710

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Harleysville Insurance PAC-Federal

Mailing Address 355 Maple Avenue

City State Zip Code
Harleysville PA 19438-2297

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: 33284844

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **15000.00**

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:		PAGE 31 / 39	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Liberty Mutual Insurance Company Political Action Committee		Date of Receipt	
	Mailing Address 175 Berkeley Street		M M / D D / Y Y Y Y 04 / 27 / 2011	
	City	State	Zip Code	Transaction ID: 33285107
	Boston	MA	02117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		5000.00	
	C			
Name of Employer		Occupation		
Receipt For:		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		5000.00		
<input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	20000.00

**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"/> 24	<input type="checkbox"/> 25	<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

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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Ben Nelson for U.S. Senate <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name Sena Ben Nelson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33153944 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 3000.00
	011 Category/ Type
	Full Name (Last, First, Middle Initial) Blaine For Congress 2012 <hr/> Mailing Address 217 Third St. SW <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Blaine Luetkemeyer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 1500.00	
011 Category/ Type	Transaction ID: 33153960 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
Amount of Each Disbursement this Period 5000.00	
011 Category/ Type	Full Name (Last, First, Middle Initial) The Blue Dog PAC <hr/> Mailing Address 236 Massachusetts Ave, NE Suite 603 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name The Blue Dog PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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"/> 24	<input type="checkbox"/> 25	<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

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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bob Corker For Senate</p> <p>Mailing Address 518 Georgia Ave 2nd Floor</p> <p>City Chatanooga State TN Zip Code 37403</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Mr. Robert Corker</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District:</p>	<p>Transaction ID: 33153976</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	7	/	2	0	1	1	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	7	/	2	0	1	1													
2000.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Friends Of Chris Murphy</p> <p>Mailing Address PO Box 127</p> <p>City Cheshire State CT Zip Code 06410</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Mr. Christopher Murphy</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District:</p>	<p>Transaction ID: 33153978</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	7	/	2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	7	/	2	0	1	1													
2500.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DCCC (Democratic Congressional Campaign Committee)</p> <p>Mailing Address 430 S Capitol Street, S.E.</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: 33153980</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	7	/	2	0	1	1	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	7	/	2	0	1	1													
5000.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen <hr/> Mailing Address P.O. Box 44369 250 Prairie Center Drive <hr/> City Eden Prairie State MN Zip Code 55344 <hr/> Purpose of Disbursement 011 Candidate Name Mr. Erik Paulsen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03	Transaction ID: 33153986 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>
B.	Full Name (Last, First, Middle Initial) Campbell for Congress <hr/> Mailing Address 18004 Sky Park Circle Suite 155 <hr/> City Irvine State CA Zip Code 92614 <hr/> Purpose of Disbursement 011 Candidate Name Mr. John Campbell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 48	Transaction ID: 33153990 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) Alamo PAC <hr/> Mailing Address 919 Congress Ave. Suite 1400 Frost Bank Plaza <hr/> City Austin State TX Zip Code 78701 <hr/> Purpose of Disbursement 011 Candidate Name Alamo PAC 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:	Transaction ID: 33153998 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">4500.00</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Hagan For US Senate Inc <hr/> Mailing Address PO Box 29103 <hr/> City Greensboro State NC Zip Code 27429 <hr/> Purpose of Disbursement <hr/> Candidate Name Hagan For US Senate Inc <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33153999 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Texans For Lamar Smith <hr/> Mailing Address PO Box 6155 <hr/> City San Antonio State TX Zip Code 78209 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Lamar Smith <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33154000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Marco Rubio For US Senate <hr/> Mailing Address 2030 South Douglas Road Suite 105 <hr/> City Coral Gables State FL Zip Code 33134 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Marco Rubio <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33154001 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Nydia M. Velazquez to Congress

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Nydia Velazquez

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 12

Transaction ID: 33154002

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Pete Sessions for Congress

Mailing Address PO Box 140970

City Dallas State TX Zip Code 75214-0970

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Pete Sessions

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 05

Transaction ID: 33154004

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Raul Labrador For Idaho

Mailing Address PO Box 1616

City Boise State ID Zip Code 83701

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Raul Labrador

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: 33154010

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

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"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Scott Garrett for Congress <hr/> Mailing Address P.O. Box 905 <hr/> City Newton State NJ Zip Code 07860-0905 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Scott Garrett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33154040 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 4000.00
	011 Category/ Type
	Full Name (Last, First, Middle Initial) Sheila Jackson Lee for Congress <hr/> Mailing Address 3401 Labranch <hr/> City Houston State TX Zip Code 77004 <hr/> Purpose of Disbursement <hr/> Candidate Name Repr Sheila Jackson Lee <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 2000.00	
011 Category/ Type	Transaction ID: 33154108 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
Amount of Each Disbursement this Period 1000.00	011 Category/ Type
Full Name (Last, First, Middle Initial) South Dakota First <hr/> Mailing Address PO Box 155 <hr/> City Souix Falls State SD Zip Code 57101 <hr/> Purpose of Disbursement <hr/> Candidate Name South Dakota First <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Stivers For Congress <hr/> Mailing Address 81 S Fifth Street <hr/> City Columbus State OH Zip Code 43215 <hr/> Purpose of Disbursement 011 Candidate Name Mr. Steve Stivers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15	Transaction ID: 33154109 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2000.00</div>
B.	Full Name (Last, First, Middle Initial) Terri Sewell For Congress <hr/> Mailing Address P.O. Box 1964 <hr/> City Birmingham State AL Zip Code 35201 <hr/> Purpose of Disbursement 011 Candidate Name Ms. Terri Sewell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 07	Transaction ID: 33154111 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) Scott Garrett for Congress <hr/> Mailing Address P.O. Box 905 <hr/> City Newton State NJ Zip Code 07860-0905 <hr/> Purpose of Disbursement 011 Candidate Name Mr. Scott Garrett Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 05	Transaction ID: 33154138 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">4000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Blaine For Congress 2012 Mailing Address 217 Third St. SW City Washington State DC Zip Code 20003 Purpose of Disbursement Void - Blaine For Congress 2012/canceled Candidate Name Rep. Blaine Luetkemeyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33154243 Date of Disbursement 04 / 07 / 2011 Amount of Each Disbursement this Period -1500.00 Void - Blaine For Congress 2012/canceled
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Friends For Gregory Meeks Mailing Address 153-01 Jamaica Ave. Suite 535 City Jamaica State NY Zip Code 11432 Purpose of Disbursement Candidate Name Rep. Gregory Meeks Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33168181 Date of Disbursement 04 / 13 / 2011 Amount of Each Disbursement this Period 2500.00
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

47500.00