

**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 linesProperty 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

ZIP CODE

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:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

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

04

01

2010

through

04

30

2010

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

19

2010

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**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 53

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	162108.60
(b) Cash on Hand at Beginning of Reporting Period	195629.90	
(c) Total Receipts (from Line 19)	61438.61	232589.91
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	257068.51	394698.51
7. Total Disbursements (from Line 31)	22200.00	159830.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	234868.51	234868.51
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

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	4	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	W	Y
0	4	3	0	2	0	1	0

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)	45607.35	149896.40
(ii) Unitemized	8805.59	33155.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)	54412.94	183051.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	7000.00	45000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	61412.94	228051.73
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	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	25.67	38.18
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))	61438.61	232589.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	61438.61	232589.91

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	16000.00	150130.00	
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.....	6200.00	9700.00	
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))..	22200.00	159830.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22200.00	159830.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	61412.94	228051.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61412.94	228051.73
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: PAGE 6 / 53

(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 Christopher J. Colavita

Mailing Address P. O. Box 60069

City

State

Zip Code

City Of Industry

CA

91716-0069

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation

Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 1 0

Transaction ID: 31570054

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Dan Bleak

Mailing Address 3410 Mammoth Court

City

State

Zip Code

Laramie

WY

82072-5091

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

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 Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570075

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. John E. Dougherty

Mailing Address 1940 Custer

City

State

Zip Code

Laramie

WY

82070-4313

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Vice President Operations

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570076

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1100.00

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 / 53

(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. Jim Geesey

Mailing Address 2419 Dover Drive

City

Laramie

State

WY

Zip Code

82072-5300

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570077

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Colleen K McKinnon

Mailing Address 1670 Apache Dr.

City

Laramie

State

WY

Zip Code

82072-6964

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Vice President Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570078

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Dave Perdue

Mailing Address 120 Corthell Road

City

Laramie

State

WY

Zip Code

82070-4826

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570079

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 53

(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. Cindy Romero

Mailing Address 1730 Person

City

Laramie

State

WY

Zip Code

82070-5437

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Employee Relations Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570080

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Roy Schmett

Mailing Address 1708 W. Person

City

Laramie

State

WY

Zip Code

82070-6078

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570086

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Suloff

Mailing Address 2678 Wyoming Ave.

City

Laramie

State

WY

Zip Code

82070-6224

FEC ID number of contributing federal political committee.

C

Name of Employer
Mountain West Farm Bureau
Mutual Insur

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 Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570087

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 53

(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)

Nigel J. Griffey

Mailing Address 19073 Quiver Ridge Drive

City

Leesburg

State

VA

Zip Code

20176-8447

FEC ID number of contributing federal political committee.

C

Name of Employer
Medmarc Insurance Group

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570088

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

Ronald J Swanstrom

Mailing Address 724 Burgess Hill Rd

City

Naperville

State

IL

Zip Code

60565-6103

FEC ID number of contributing federal political committee.

C

Name of Employer
Argo Group International Holdings, Ltd

Occupation
Sr VP Chief Reserving Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570089

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas A. Goldberg

Mailing Address 243 Irving Street

City

San Mateo

State

CA

Zip Code

94402-2221

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation
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
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570090

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1175.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 53

(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)

Craig W Kliethermes

Mailing Address 11306

N. Pawnee Road

City

Peoria

State

IL

Zip Code

61615

FEC ID number of contributing
federal political committee.

C

Name of Employer
RLI

Occupation

Sr Vice President Risk Services

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 1 0

Transaction ID: 31570198

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Mr. James Wallace

Mailing Address 6023 N Waterbury Road

City

Des Moines

State

IA

Zip Code

50312-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
GuideOne Insurance

Occupation

President and Chief Executive Officer

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 / 0 5 / 2 0 1 0

Transaction ID: 31570200

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas Konopka

Mailing Address 4186 Governor Yeardley Lane

City

Fairfax

State

VA

Zip Code

22030-8115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medmarc Insurance Group

Occupation

Sr. Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: 31570203

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

1765.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 53

(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)

Sharon K. Hayman

Mailing Address 7 Blue Ridge Dr.

City

Trenton

State

NJ

Zip Code

08638-1214

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation

Director Medical Services Administrati

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572591

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jack C Salzwedel

Mailing Address 5117 St Cyr Road

City

Middleton

State

WI

Zip Code

53562-2457

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

President and COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572593

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Scott J Seymour

Mailing Address 696 Acadia Way

City

Verona

State

WI

Zip Code

53593-8227

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

Vice President - Government Affair & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572594

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

2350.00

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 / 53

(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. Diane E. Griffin

Mailing Address 250 Oakham Court

City

Powell

State

OH

Zip Code

43065-8903

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Director MIS Applications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572610

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robin K. Madosky

Mailing Address 1530 S Champion Ave.

City

Columbus

State

OH

Zip Code

43207-1306

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572611

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Ms. Nancy D. Edwards

Mailing Address 2615 Johnston Road

City

Columbus

State

OH

Zip Code

43220-4532

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

VP Special Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572613

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 13 / 53

(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)

Craig L. Segbers

Mailing Address 12293 Mallard Pound CT.

City

Pickerington

State

OH

Zip Code

43147-8478

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Systems Architect

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 / 0 8 / 2 0 1 0

Transaction ID: 31572614

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

John M Boschell

Mailing Address 414 Praireview Drive

City

Geneva

State

IL

Zip Code

60134-4617

FEC ID number of contributing federal political committee.

C

Name of Employer
Unitrin, Inc.

Occupation

Vice President/Chief Investment Office

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 / 0 8 / 2 0 1 0

Transaction ID: 31572615

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. DeFalco

Mailing Address 132 Bull Run Road

City

Trenton

State

NJ

Zip Code

08638-1316

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation

Vice President and Chief Actuary

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 / 0 8 / 2 0 1 0

Transaction ID: 31572667

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 14 / 53

(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)

Lee Bellarmino

Mailing Address 1134 Avrum Drive

City

Toms River

State

NJ

Zip Code

08753-5202

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572668

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Robert R Hill

Mailing Address 11726 N 120 St

City

Scottsdale

State

AZ

Zip Code

85259-3242

FEC ID number of contributing federal political committee.

C

Name of Employer
Assurant Insurance Group

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572669

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Fariborz Ghadar

Mailing Address 2029 Connecticut Avenue NW #21

City

Washington

State

DC

Zip Code

20008-6142

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31572670

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

2200.00

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 / 53

(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. Patrick W. Breslin

Mailing Address 61 Avalon Road

City

Pennington

State

NJ

Zip Code

08534-5183

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation

Assistant Secretary Communications

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 / 0 8 / 2 0 1 0

Transaction ID: 31573031

Amount of Each Receipt this Period

480.00

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth L. Fields

Mailing Address 40878 Pathfield Dr.

City

Columbus

State

OH

Zip Code

43230

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Ass't Vice 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 / 0 8 / 2 0 1 0

Transaction ID: 31573032

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Clyde H Fitch

Mailing Address 697 Dennison Ave

City

Columbus

State

OH

Zip Code

43215-1605

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Sr VP Chief Sales Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31573033

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1320.00

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 / 53

(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)

Joseph I Gaskella

Mailing Address 7909 Narrow Leaf Dr

City

Blacklick

State

OH

Zip Code

43004-6044

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

RVP-State Auto Middle Market

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 / 0 8 / 2 0 1 0

Transaction ID: 31573034

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Mr. John M. Petrucci

Mailing Address 5961 Morganwood Sq.

City

Hilliard

State

OH

Zip Code

43026-7176

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31573035

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Gregory S. Ramah

Mailing Address 22156 Horseshoe Lane

City

Strongsville

State

OH

Zip Code

44149-9254

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Program Manager

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 / 0 8 / 2 0 1 0

Transaction ID: 31573083

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

980.00

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 / 53

(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)

Timothy G. Reik

Mailing Address 322 Tree Haven Ave.

City

Powell

State

OH

Zip Code

43065-8511

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Manager

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 / 0 8 / 2 0 1 0

Transaction ID: 31573084

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Restrepo

Mailing Address 3301 Ocean Dr. South

City

Jacksonville Beach

State

FL

Zip Code

32250-5964

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Chairman and CEO

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 / 0 8 / 2 0 1 0

Transaction ID: 31573085

Amount of Each Receipt this Period

3600.00

C.

Full Name (Last, First, Middle Initial)

Ms. M. Jean Reynolds

Mailing Address 3037 Leeds Road

City

Columbus

State

OH

Zip Code

43221-2628

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Resident VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: 31573086

Amount of Each Receipt this Period

1300.00

SUBTOTAL of Receipts This Page (optional)

5140.00

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 / 53

(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. Rick L. Holbein

Mailing Address 5531 Aryshire Court

City

Dublin

State

OH

Zip Code

43017-9440

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Branch Manager - VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 0

Transaction ID: 31583453

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. David R. Russell

Mailing Address 6351 Champions Drive

City

Westerville

State

OH

Zip Code

43082-8595

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

AVP Enterprise Network Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 0

Transaction ID: 31583454

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Mr. George Furlong

Mailing Address 795 Rodney Drive

City

Nashville

State

TN

Zip Code

37205-3064

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Regional Vice 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 / 1 2 / 2 0 1 0

Transaction ID: 31583455

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

1015.00

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 19 / 53

(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. David W. Dalton

Mailing Address 3450 Heritage Oaks Drive

City

Hilliard

State

OH

Zip Code

43026-7636

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

V P - Director of Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 0

Transaction ID: 31583498

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Heffernan

Mailing Address 1927 Drew Avenue

City

Columbus

State

OH

Zip Code

43235-7411

FEC ID number of contributing federal political committee.

C

Name of Employer
State Automobile Insurance Company

Occupation

AVP, Claims

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 / 1 3 / 2 0 1 0

Transaction ID: 31583499

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gene R. Roberts

Mailing Address 3636 Manchester Drive

City

Powell

State

OH

Zip Code

43065-8470

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

AVP Director of Claims Operations

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 / 1 2 / 2 0 1 0

Transaction ID: 31584080

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

830.00

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 / 53

(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)

Gregory Rose

Mailing Address 12096 Castlestone Dr.

City

Fishers

State

IN

Zip Code

46037-3916

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Territory Manager

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 / 1 2 / 2 0 1 0

Transaction ID: 31584082

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Keith A Yun

Mailing Address 6718 Braeswick Ct

City

Canal Winchester

State

OH

Zip Code

43110-8770

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Manager Non-Standard Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 31649891

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Mr. Donald L. Spickler

Mailing Address 4041 Fairway Drive

City

Medina

State

OH

Zip Code

44256-7849

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Resident Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 31649892

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

915.00

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 / 53

(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. Larry D. Williams

Mailing Address 1045 N 3B'S & K Road

City

Sunbury

State

OH

Zip Code

43074

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Vice President

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 / 1 6 / 2 0 1 0

Transaction ID: 31649893

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Donald Applegate

Mailing Address 9 Hickory Drive

City

Columbus

State

NJ

Zip Code

08022-2235

FEC ID number of contributing federal political committee.

C

Name of Employer
Farmers Insurance Company of Flemingto

Occupation

President and CEO

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 / 1 6 / 2 0 1 0

Transaction ID: 31649895

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Alita A. Burke

Mailing Address 5772 Lakeview Dr.

City

Hilliard

State

OH

Zip Code

43026-1370

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Personal Lines Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 31649915

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

890.00

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 22 / 53

(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. Al Meyer

Mailing Address 8818 Royal Oaks Drive

City

Madison

State

WI

Zip Code

53593-7954

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

Vice President Marketing

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 9 / 2 0 1 0

Transaction ID: 31657075

Amount of Each Receipt this Period

300.00

B.

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: 31657076

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jerome G. Rekowski

Mailing Address 1993 Skyline Drive

City

Stoughton

State

WI

Zip Code

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 / 1 9 / 2 0 1 0

Transaction ID: 31657083

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

875.00

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 23 / 53

(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. Matthew S. Mrozek

Mailing Address 1877 Bierstad Drive

City

Powell

State

OH

Zip Code

43065-8816

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Transaction ID: 31657084

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Mr. Bradley J. Gleason

Mailing Address 3727 Nelson Lane

City

Deerfield

State

WI

Zip Code

53531-9707

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

Exec Vice President

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 0 / 2 0 1 0

Transaction ID: 31657086

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr. David R. Anderson

Mailing Address 4717 Fond Du Lac Terrace

City

Madison

State

WI

Zip Code

53705-4812

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: 31657087

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1250.00

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 / 53

(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)

Marc A Meiches

Mailing Address 43 Paine Ave.

City

Prides Crossing

State

MA

Zip Code

01965

FEC ID number of contributing federal political committee.

C

Name of Employer
Electric Insurance Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: 31657090

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Terrence P. Higerd

Mailing Address 1027 Walsingham Court

City

Westerville

State

OH

Zip Code

43081-2768

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Vice President Director MIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: 31657091

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Cynthia Lin

Mailing Address 1121 Pebble Brook Dr

City

Columbus

State

OH

Zip Code

43240-6015

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Methodologist I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: 31657436

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

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 25 / 53

(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)

Keith Iler

Mailing Address 3755 Stonington PL

City

Zionsville

State

IN

Zip Code

46077-7003

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: 31657437

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Daniel O. Kennedy

Mailing Address 570 Forsetdale Drive

City

Atlanta

State

GA

Zip Code

30342

FEC ID number of contributing federal political committee.

C

Name of Employer
RLI

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: 31657438

Amount of Each Receipt this Period

275.00

C.

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

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 0

Transaction ID: 31666021

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1125.00

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 26 / 53

(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. Daniel R. Schultz

Mailing Address 1208 Pocahontas Drive

City

Monona

State

WI

Zip Code

53716-2961

FEC ID number of contributing federal political committee.

C

Name of Employer
American Family Insurance Group

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 0

Transaction ID: 31666027

Amount of Each Receipt this Period

700.00

B.

Full Name (Last, First, Middle Initial)

Gary D Hallman

Mailing Address 4070 Fox Meadow Drive

City

Medina

State

OH

Zip Code

44256-7836

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 0

Transaction ID: 31666028

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas E. Allen

Mailing Address 145 N High St.
#1101

City

Columbus

State

OH

Zip Code

43215-3006

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Vice President & IT 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 3 / 2 0 1 0

Transaction ID: 31672559

Amount of Each Receipt this Period

480.00

SUBTOTAL of Receipts This Page (optional)

1780.00

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 / 53

(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)

Leonard S Genders

Mailing Address 2110 Twin Flower circle

City

Grove City

State

OH

Zip Code

43123-8559

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

AVP / IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: 31672577

Amount of Each Receipt this Period

251.00

B.

Full Name (Last, First, Middle Initial)

Stephen J Denino

Mailing Address 5387 Meadow Grove Dr.

City

Grove City

State

OH

Zip Code

43123-8782

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Comp-
anies

Occupation

Manager - IT Governance

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 3 / 2 0 1 0

Transaction ID: 31672578

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Seth A. Davis

Mailing Address 7220 N. Wescoh Court

City

Peoria

State

IL

Zip Code

61615

FEC ID number of contributing federal political committee.

C

Name of Employer
RLI

Occupation

V P Internal Audit

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 2 / 2 0 1 0

Transaction ID: 31672580

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

731.00

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 / 53

(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. Steven E. English

Mailing Address 6608 Carinlough PI

City

Dublin

State

OH

Zip Code

43016-6005

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Vice President & Chief Financial Office

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 / 2 6 / 2 0 1 0

Transaction ID: 31672662

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Darren K Dunn

Mailing Address N4821 Linse Rd

City

West Salem

State

WI

Zip Code

54669-9505

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Personal Insurance Sales Manager

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 0

Transaction ID: 31672664

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Chris Kamer

Mailing Address 5977 Heritage View Ct

City

Hilliard

State

OH

Zip Code

43026-7662

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

IT Manager

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 0

Transaction ID: 31673290

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

880.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 29 / 53

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☒ 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. Kim Eri Bailey

Mailing Address 12436 Stone Drive

City

Indianapolis

State

IN

Zip Code

46236-9209

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Vice President, Director of MIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 0

Transaction ID: 31674878

Amount of Each Receipt this Period

360.00

B.

Full Name (Last, First, Middle Initial)

Michael R Reed

Mailing Address 322 Hastings CT

City

Westerville

State

OH

Zip Code

43082-6004

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

IT Applications Manager

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 0

Transaction ID: 31674882

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Andrew S. Frazier

Mailing Address 23 Sherwood Downs

City

Park Ridge

State

NJ

Zip Code

07656-2603

FEC ID number of contributing federal political committee.

C

Name of Employer
Western World Insurance Group

Occupation

President and 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 / 2 0 / 2 0 1 0

Transaction ID: 31674883

Amount of Each Receipt this Period

3600.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 53

(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)

Patrick M Dukes

Mailing Address 1930 Riverside Drive

City

Upper Arlington

State

OH

Zip Code

43221-4129

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Compliance Officer

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 8 / 2 0 1 0

Transaction ID: 31688268

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Ms. Cynthia Powell

Mailing Address 2204 Stratingham Drive

City

Dublin

State

OH

Zip Code

43016-8908

FEC ID number of contributing federal political committee.

C

Name of Employer
State Automobile Mutual Insurance Comp

Occupation

Vice President & Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 31688269

Amount of Each Receipt this Period

650.00

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 31688270

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

1240.00

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 / 53

(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. Thomas R. Brown

Mailing Address 30 Fredrick Avenue

City

Atherton

State

CA

Zip Code

94027-2204

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Chairman and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 31688272

Amount of Each Receipt this Period

2700.00

B.

Full Name (Last, First, Middle Initial)

Mr. Joel Brown

Mailing Address 8739 Sweetwater Ct

City

Powell

State

OH

Zip Code

43065-8364

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 31688273

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Judy A. Snyder

Mailing Address 565 Glenn Haven Rd

City

Upper Sandusky

State

OH

Zip Code

43351-9312

FEC ID number of contributing federal political committee.

C

Name of Employer
State Auto Insurance Companies

Occupation

Personal Lines Underwriting Manager

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 8 / 2 0 1 0

Transaction ID: 31688276

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

3540.00

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 32 / 53

(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. Gregory V. Ostergren

Mailing Address Corporate Centre
1949 East Sunshine

City State Zip Code
Springfield MO 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

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456193323771

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

B.

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 0

Transaction ID: PR1456336823771

Amount of Each Receipt this Period

300.00

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

C.

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 0

Transaction ID: PR1456395523771

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(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. Bruce D Trost

Mailing Address 13749 Bay Hill Court

City

Clive

State

IA

Zip Code

50325-8563

FEC ID number of contributing federal political committee.

C

Name of Employer
FBL Financial Group

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456453323771

Amount of Each Receipt this Period

416.67

P/R Deduction (\$416.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott A. Joyner

Mailing Address 57 E. Delaware
#2105

City

Chicago

State

IL

Zip Code

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 0

Transaction ID: PR1456541523771

Amount of Each Receipt this Period

213.00

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

C.

Full Name (Last, First, Middle Initial)

Mr. Steven Wittmuss

Mailing Address 7410 Lambert Place

City

Lincoln

State

NE

Zip Code

68516-5813

FEC ID number of contributing federal political committee.

C

Name of Employer
FBL Financial Group

Occupation

Property Claims Vice President

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 0

Transaction ID: PR1456694623771

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

729.67

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456707723771

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456707823771

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456707923771

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456708123771

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456708223771

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456708423771

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)
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☒ 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. Roy D Kinnan

Mailing Address 46139 Galway Drive

City

Novi

State

MI

Zip Code

48374-3972

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

SR VP-CFO & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456708923771

Amount of Each Receipt this Period

75.00

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

B.

Full Name (Last, First, Middle Initial)

Mr. Derick Adams

Mailing Address 26777 Halsted Road

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

VP-Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456719923771

Amount of Each Receipt this Period

90.00

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

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Graf

Mailing Address 45000 Drocton

City

Novi

State

MI

Zip Code

48375-3802

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

VP-Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456720623771

Amount of Each Receipt this Period

150.00

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

SUBTOTAL of Receipts This Page (optional)

315.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 Dieterle

Mailing Address 47202 White Pines Drive

City

Novi

State

MI

Zip Code

48374-3697

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

VP-Fld Mkt & Undrwrtnng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456721823771

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Bi-Weekly)

B.

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

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1456768823771

Amount of Each Receipt this Period

60.00

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

C.

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1566733123771

Amount of Each Receipt this Period

75.00

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

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. 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 Undrwrtg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1578285423771

Amount of Each Receipt this Period

90.00

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

B.

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

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1632493223771

Amount of Each Receipt this Period

100.00

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

C.

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. McKay

Mailing Address 1401 South Joyce Street

City

Arlington

State

VA

Zip Code

22202-1874

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 ▼

833.36

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1695170223771

Amount of Each Receipt this Period

208.34

P/R Deduction (\$104.17 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)

398.34

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 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

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR1790384223771

Amount of Each Receipt this Period

208.34

P/R Deduction (\$104.17 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)

D. Kenton Brine

Mailing Address 1500 Water Street SW No 2

City

Olympia

State

WA

Zip Code

98501-2295

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers Association

Occupation

Asst. VP State Government Relations

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 / 3 0 / 2 0 1 0

Transaction ID: PR1829855023771

Amount of Each Receipt this Period

60.00

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

C.

Full Name (Last, First, Middle Initial)

Mr. Kurt D Gallinger

Mailing Address 26777 Halsted Road

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

VP Gov Rel & Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR2020349223771

Amount of Each Receipt this Period

180.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

448.34

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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)

Debra Even

Mailing Address 26777 Halsted

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

AVP, Credit & Collection

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR205959223771

Amount of Each Receipt this Period

75.00

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

B.

Full Name (Last, First, Middle Initial)

Vincent T Donnelly

Mailing Address 174 Meadow View Lane

City

Lansdale

State

PA

Zip Code

19446-5931

FEC ID number of contributing federal political committee.

C

Name of Employer
PMA Insurance Group

Occupation

President & CEO

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 0

Transaction ID: PR2151653923771

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Leo M Orth, Jr

Mailing Address 14614 Wilden Drive

City

Urbandale

State

IA

Zip Code

50323-2070

FEC ID number of contributing federal political committee.

C

Name of Employer
FBL Financial Group

Occupation

Vice President Research & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR2194743423771

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

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

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☒ 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)

David A. Sampson

Mailing Address 2435 Luckett Ave

City

Vienna

State

VA

Zip Code

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 0

Transaction ID: PR2228336723771

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

Northbrook

State

IL

Zip Code

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 0

Transaction ID: PR2247336323771

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. Kappmeyer

Mailing Address 1054 186th Street

City

Homewood

State

IL

Zip Code

60430-3518

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers Association

Occupation

Vice President Finance and Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR2247688723771

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional)

555.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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)

Marguerite Tortorello

Mailing Address 4711 North Kenmore

City

Chicago

State

IL

Zip Code

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
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR2357924923771

Amount of Each Receipt this Period

300.00

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

B.

Full Name (Last, First, Middle Initial)

Paul Blume, JR

Mailing Address 430 W. sheridan Place

City

Lake Bluff

State

IL

Zip Code

60044-2327

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation

Sr VP State Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: PR2400795623771

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

45607.35

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

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

FOR LINE NUMBER: PAGE 43 / 53

(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)
Alabama Farmers Federation (ALFA PAC)

Mailing Address P. O. Box 11023

City State Zip Code
 Montgomery AL 36191

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 / 0 8 / 2 0 1 0

Transaction ID: 31572697

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Farmers Mutual Hail PAC

Mailing Address 2323 Grand Avenue

City State Zip Code
 Des Moines IA 50312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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 / 1 5 / 2 0 1 0

Transaction ID: 31649896

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 / 53

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

Full Name (Last, First, Middle Initial)

Republican Party of Wisconsin - Federal Account

Mailing Address 148 East Johnson Street

City Madison State WI Zip Code 53703

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 31602751

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

011

Category/
Type

A.

Full Name (Last, First, Middle Initial)

Swati Dandekar Campaign Committee (Comm #1324)

Mailing Address 2731 28th Avenue

City Marion State IA Zip Code 52302

Purpose of Disbursement
Swati Dandekar, STATE SENATE 18th IACandidate Name
IA Sen. Swati DandekarOffice Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 31604452

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	0

Amount of Each Disbursement this Period

250.00

011

Category/
TypeSwati Dandekar, STATE SEN-
ATE 18th IA

B.

Full Name (Last, First, Middle Initial)

Citizens for Gronstal (Comm #1612)

Mailing Address 220 Bennett Avenue

City Council Bluffs State IA Zip Code 51503

Purpose of Disbursement
Michael Gronstal, STATE SENATE 50th IACandidate Name
Sena Michael GronstalOffice Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 31606642

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	0

Amount of Each Disbursement this Period

200.00

011

Category/
TypeMichael Gronstal, STATE
SENATE 50th IA

C.

SUBTOTAL of Disbursements This Page (optional)

1450.00

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)

PAGE 45 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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) Committee to Elect Matt McCoy (Comm #703)	Transaction ID: 31606696 Date of Disbursement																				
Mailing Address 110 35th Street	<table border="1"> <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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Des Moines State IA Zip Code 50312	Amount of Each Disbursement this Period																				
Purpose of Disbursement Matt McCoy, STATE SENATE 31st IA Candidate Name Sena Matt McCoy	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	011 Category/ Type Matt McCoy, STATE SENATE 31st IA																				
B. Full Name (Last, First, Middle Initial) McKinley for Iowa (Comm #1269)	Transaction ID: 31606735 Date of Disbursement																				
Mailing Address 21884 -- 483rd Lane	<table border="1"> <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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Chariton State IA Zip Code 50049-0609	Amount of Each Disbursement this Period																				
Purpose of Disbursement Paul McKinley, STATE SENATE 36th IA Candidate Name Senator Paul McKinley	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	011 Category/ Type Paul McKinley, STATE SENA- TE 36th IA																				
C. Full Name (Last, First, Middle Initial) Olive the Supporters of Rich for Senate (Comm#1645)	Transaction ID: 31606832 Date of Disbursement																				
Mailing Address 1264 Northridge Road	<table border="1"> <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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Story City State IA Zip Code 50248-0247	Amount of Each Disbursement this Period																				
Purpose of Disbursement Rich Olive, STATE SENATE 5th IA Candidate Name IA Sen. Rich Olive	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	011 Category/ Type Rich Olive, STATE SENATE 5th IA																				

SUBTOTAL of Disbursements This Page (optional)

1000.00

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)

PAGE 46 / 53

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

Full Name (Last, First, Middle Initial)

Paulsen for State House Committee (Comm #1318)

Mailing Address P. O. Box 250

City Hiawatha State IA Zip Code 52233

Purpose of Disbursement
Kraig Paulsen, STATE HOUSE 35th IA

Candidate Name
IA Rep. Kraig Paulsen

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 35

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 31606885

Date of Disbursement

04 / 15 / 2010

Amount of Each Disbursement this Period

750.00

Kraig Paulsen, STATE HOUSE
35th IA

Full Name (Last, First, Middle Initial)

Rielly for Senate (Comm#1516)

Mailing Address 113 North Market Street

City Oskaloosa State IA Zip Code 52577

Purpose of Disbursement
Thomas Rielly, STATE SENATE 38th IA

Candidate Name
IA Sen. Thomas Rielly

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 31606999

Date of Disbursement

04 / 15 / 2010

Amount of Each Disbursement this Period

250.00

Thomas Rielly, STATE SENA-
TE 38th IA

Full Name (Last, First, Middle Initial)

Soderberg for House (Comm #1492)

Mailing Address 800 2nd Street SE

City LeMars State IA Zip Code 51031

Purpose of Disbursement
Chuck Soderberg, STATE HOUSE 3rd IA

Candidate Name
IA Rep. Chuck Soderberg

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 03

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 31607073

Date of Disbursement

04 / 15 / 2010

Amount of Each Disbursement this Period

250.00

Chuck Soderberg, STATE HO-
USE 3rd IA

SUBTOTAL of Disbursements This Page (optional)

1250.00

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)

PAGE 47 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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) Hugh Holliman Campaign	Transaction ID: 31641945 Date of Disbursement																				
Mailing Address 223 D South Main Street	<table border="1"> <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Lexington State NC Zip Code 27292	Amount of Each Disbursement this Period																				
Purpose of Disbursement Lindsey Holliman, STATE HOUSE 81st NC	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Representa Lindsey Holliman	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 81 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Lindsey Holliman, STATE HOUSE 81st NC																				
B. Full Name (Last, First, Middle Initial) Tucker Campaign	Transaction ID: 31641973 Date of Disbursement																				
Mailing Address 1206 Rosehill Drive	<table border="1"> <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Waxhaw State NC Zip Code 28173	Amount of Each Disbursement this Period																				
Purpose of Disbursement Wyatt Tucker, STATE SENATE 35th NC	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Wyatt Thomas Tucker, Sr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Wyatt Tucker, STATE SENATE 35th NC																				
C. Full Name (Last, First, Middle Initial) Clark Jenkins Campaign	Transaction ID: 31641983 Date of Disbursement																				
Mailing Address P. O. Box 310	<table border="1"> <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Tarboro State NC Zip Code 27886	Amount of Each Disbursement this Period																				
Purpose of Disbursement Clark Jenkins, STATE SENATE 3rd NC	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name NC Sen. Clark Jenkins	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Clark Jenkins, STATE SENA-TE 3rd NC																				

SUBTOTAL of Disbursements This Page (optional)

1000.00

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)

PAGE 48 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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) Jerry Dockham Campaign	Transaction ID: 31641987 Date of Disbursement																				
Mailing Address P.O.Box 265	<table border="1"> <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Denton State NC Zip Code 27239	Amount of Each Disbursement this Period																				
Purpose of Disbursement Jerry Dockham, STATE HOUSE 80th NC Candidate Name Repr Jerry Dockham	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 80 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Jerry Dockham, STATE HOUSE 80th NC																				
B. Full Name (Last, First, Middle Initial) Bruce Goforth Campaign	Transaction ID: 31641991 Date of Disbursement																				
Mailing Address 1 Cedar Ridge Drive	<table border="1"> <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Asheville State NC Zip Code 28803	Amount of Each Disbursement this Period																				
Purpose of Disbursement D. Goforth, STATE HOUSE 115th NC Candidate Name NC Rep. D. Goforth	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 15 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type D. Goforth, STATE HOUSE 115th NC																				
C. Full Name (Last, First, Middle Initial) DeLuca for Legislator Committee	Transaction ID: 31661986 Date of Disbursement																				
Mailing Address 1438 Homestead Road	<table border="1"> <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>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	0												
City Verona State PA Zip Code 15147	Amount of Each Disbursement this Period																				
Purpose of Disbursement Anthony DeLuca, STATE HOUSE 32nd PA Candidate Name Representa Anthony DeLuca	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 32 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Anthony DeLuca, STATE HOU- SE 32nd PA																				

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

5700.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 / 53

<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) Marco Rubio For US Senate		Transaction ID: 31668409 Date of Disbursement <table border="1"> <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>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
Mailing Address 2030 South Douglas Road Suite 105		Amount of Each Disbursement this Period <table border="1"> <tr> <td>-5000.00</td> </tr> </table>	-5000.00																			
-5000.00																						
City Coral Gables State FL Zip Code 33134																						
Purpose of Disbursement Void - Marco Rubio For Us Senate																						
Candidate Name Mr. Marco Rubio																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Marco Rubio For Us Senate																				
B. Full Name (Last, First, Middle Initial) Citizens For Altmire		Transaction ID: 31670917 Date of Disbursement <table border="1"> <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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	8		2	0	1	0													
Mailing Address P.O. Box 1776		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City Freedom State PA Zip Code 15042																						
Purpose of Disbursement																						
Candidate Name Rep. Jason Altmire																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Geoff Davis for Congress		Transaction ID: 31671097 Date of Disbursement <table border="1"> <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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	8		2	0	1	0													
Mailing Address 700 12th Street NW Suite 700		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City Washington State DC Zip Code 20005																						
Purpose of Disbursement																						
Candidate Name Mr. Geoffrey Davis																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

-3000.00

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

Texans For Lamar Smith

Mailing Address PO Box 6155

City

San Antonio

State

TX

Zip Code

78209

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Lamar Smith

Office Sought:

☒ House

☐ Senate

☐ President

State: TX

District: 21

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 31671140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Bachus for Congress

Mailing Address P O Box 59444

City

Birmingham

State

AL

Zip Code

35259-9444

Purpose of Disbursement

011

Category/
Type

Candidate Name

Representa Spencer Bachus, III

Office Sought:

☒ House

☐ Senate

☐ President

State: AL

District: 06

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 31671234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Friends of Blanche Lambert Lincoln

Mailing Address PO Box 3197

City

Little Rock

State

AR

Zip Code

72203-3197

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sena Blanche Lincoln

Office Sought:

☐ House

☒ Senate

☐ President

State: AR

District:

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 31671755

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

Reed Committee

Mailing Address PO Box 8628

City
Cranston

State
RI

Zip Code
02920-0628

Purpose of Disbursement

011

Category/
Type

Candidate Name
Sena Jack Reed

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: RI District:

Transaction ID: 31671892

Date of Disbursement

04 / 28 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Heartland Values PAC

Mailing Address P.O. Box 505

City
Sioux Falls

State
SD

Zip Code
57101

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 31672006

Date of Disbursement

04 / 28 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Marco Rubio For US Senate

Mailing Address 2030 South Douglas Road Suite 105

City
Coral Gables

State
FL

Zip Code
33134

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Marco Rubio

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District:

Transaction ID: 31672112

Date of Disbursement

04 / 28 / 2010

Amount of Each Disbursement this Period

1000.00

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

AMERIPAC

Mailing Address 499 South Capitol St., SW-Ste. 414

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 31672147

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Kelly Ayotte

Mailing Address PO Box 233

City Nashua State NH Zip Code 03061

Purpose of Disbursement

Candidate Name
Kelly Ayotte

Office Sought: ☐ House
☒ Senate
☐ President

State: NH District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 31672292

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Jim Risch For U S Senate Committee

Mailing Address 407 W Jefferson Street

City Boise State ID Zip Code 83702

Purpose of Disbursement

Candidate Name
James Risch

Office Sought: ☐ House
☒ Senate
☐ President

State: ID District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 31672402

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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)

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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)

Friends of Schumer

Mailing Address 1551 East 23rd Street

City
Brooklyn

State
NY

Zip Code
11210

Purpose of Disbursement

Candidate Name
Sena Charles Schumer

Office Sought: ☐ House
☒ Senate
☐ President

State: NY

District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 31672403

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

16000.00