

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 OCT 17 AM 10:24  
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

MUNICH AMERICAN REASSURANCE COMPANY PAC INC

ADDRESS (number and street) 56 PERIMETER CENTER EAST, NE

Check if different than previously reported. (ACC) SUITE 500

ATLANTA GA 30346-2206

2. **FEC IDENTIFICATION NUMBER ▼** C 00504316 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  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 (12S)

Election on MMM / DDD / YYYYYYY in the State of     

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on MMM / DDD / YYYYYYY in the State of     

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

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 Amy L. Atkinson

Signature of Treasurer  Date 10 / 14 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**MUNICH AMERICAN REASSURANCE COMPANY PAC INC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="256.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="196.37"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2650.02"/>	<input type="text" value="2650.02"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2846.39"/>	<input type="text" value="2906.39"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30.00"/>	<input type="text" value="90.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2816.39"/>	<input type="text" value="2816.39"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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)

Page 3

Write or Type Committee Name

**MUNICH AMERICAN REASSURANCE COMPANY PAC INC**

Report Covering the Period: From: 07 / 01 / 2016 To: 09 / 30 / 2016

**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).....	2650.00	2650.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2650.00	2650.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2650.00	2650.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	.02	.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2650.02	2650.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2650.02	2650.02

NON-FEDERAL RECEIPTS

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	30.00	90.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30.00	90.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30.00	90.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30.00	90.00

NON-FEDERAL DISBURSEMENTS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**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) .....	2650.00	2650.00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	30.00	90.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30.00	90.00

20101017 09:00:00 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1 OF 2		
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MUNICH AMERICAN REASSURANCE COMPANY PAC INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES FILMORE**

Mailing Address  
**1986 Cobblestone Circle NE**

City **Atlanta, GA 30319-4908** State Zip Code

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation **vp**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**08 / 27 / 2016**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Steven J. Rulis**

Mailing Address **2627 Acorn Avenue**

City **Atlanta** State **GA** Zip Code **30305**

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation **VP**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**150.00**

Date of Receipt  
**08 / 27 / 2016**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT EDWARD WRIGHT**

Mailing Address **850 PIEDMONT AVE NE**

City **ATLANTA** State **GA** Zip Code **30308**

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation **VP**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**08 / 20 / 2016**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **1150.00**

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

2016-10-17 00:00:44

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

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

FOR LINE NUMBER: PAGE 2 OF 2  
(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	17
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MUNICH AMERICAN REASSURANCE COMPANY PAC INC**

**A.** Full Name (Last, First, Middle Initial)  
**Guzman, Gina C.**

Mailing Address  
**340 E. Randolph St. Apt. 303**

City **Chicago, IL 60601** State Zip Code

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation **Medical Director**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 20 / 2016**

Amount of Each Receipt this Period **500.00**

**B.** Full Name (Last, First, Middle Initial)  
**PAUL R MYERS**

Mailing Address  
**565 INDIGO DRIVE**

City **ROSWELL, GA 30376** State Zip Code

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation **VP**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 27 / 2016**

Amount of Each Receipt this Period **500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Taylor, Dennis E.**

Mailing Address  
**5303 Whitehaven Park Lane**

City **Mableton, GA 30126** State Zip Code

FEC ID number of contributing federal political committee. **C 00504316**

Name of Employer **MUNICH AMERICAN REASSURANCE COMPANY** Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 20 / 2016**

Amount of Each Receipt this Period **500.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **1500.00**

**TOTAL** This Period (last page this line number only).....▶ **2650.00**

2016-10-17 09:00:00





