

**FEC
FORM 3X**

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

Office Use Only

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

ADDRESS (number and street) 471 E BROAD ST
 Check if different than previously reported. (ACC) COLUMBUS OH 43215

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00336834 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)	(a) Quarterly Reports:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	April 15 Quarterly Report(Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X	July 15 Quarterly Report(Q2)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
	October 15 Quarterly Report(Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)
	January 31 Quarterly Report(YE)	Election on	Convention (12C)	Special (12S)	in the State of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
	Termination Report (TER)	Election on			in the State of

5. Covering Period 07 01 2002 through 09 30 2002

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 Michael Wiseman
 Signature of Treasurer Electronically Filed by Michael Wiseman Date 10 11 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^h07 ^d01 ^y2002 To: ^h09 ^d30 ^y2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^y 2002		4625.63
(b) Cash on Hand at Beginning of Reporting Period	4807.80	
(c) Total Receipts (from Line 19)	5890.68	16799.85
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10698.48	21425.48
7. Total Disbursements (from Line 30)	8113.50	18840.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2584.98	2584.98
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 (Revised 1/2001)

Page 3

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^h07 ^D01 ^v2002 To: ^h09 ^D30 ^v2002

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)	5488.00	
(ii) Unitemized	399.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5887.00	16790.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	5887.00	16790.00
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 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3.68	9.85
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	5890.68	16799.85
20. Total Federal Receipts (subtract Line 18 from Line 19)	5890.68	16799.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

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.....	13.50	40.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	13.50	40.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	600.00	600.00
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.....	7500.00	18200.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	8113.50	18840.50
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	8113.50	18840.50
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	5887.00	16790.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	5887.00	16790.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	13.50	40.50
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	13.50	40.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
John Bishop

Mailing Address
1380 Picardae Court

City State Zip Code
Powell OH 43065

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
350.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company President and COO

Payroll Deduction \$50 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **1000.00**

Transaction ID: **SA11A1.4914**

B. Full Name (Last, First, Middle Initial)
Duane Cable

Mailing Address
6884 Linbrook Blvd.

City State Zip Code
Columbus OH 43235

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Transaction ID: **SA11A1.4915**

C. Full Name (Last, First, Middle Initial)
Thomas Campena

Mailing Address
6436 Meadow Glen N

City State Zip Code
Westerville OH 43082

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Transaction ID: **SA11A1.4916**

SUBTOTAL of Receipts This Page (optional) ▶ **560.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 23

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)

A. John Coffman

Mailing Address

7D42 Tralee Drive

City

State

Zip Code

Dublin

OH

43017

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

119.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Manager

Payroll Deduction \$17 Bi-
weekly

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Transaction ID: SA11A1.4917

Full Name (Last, First, Middle Initial)

B. Thomas Cole

Mailing Address

410 Canterbury Ct.

City

State

Zip Code

Westerville

OH

43082

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

105.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Manager

Payroll Deduction \$15 Bi-
weekly

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: SA11A1.4918

Full Name (Last, First, Middle Initial)

C. Kathleen Cooper

Mailing Address

10544 Smoke Road, SW

City

State

Zip Code

Pataskala

OH

43062

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

105.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Manager

Payroll Deduction \$15 Bi-
weekly

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: SA11A1.4919

SUBTOTAL of Receipts This Page (optional) ▶ **329.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Daniel Crawford
 Full Name (Last, First, Middle Initial)
 Mailing Address: 6323 Cook Road
 City: Powell State: OH Zip Code: 43065
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 175.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Vice President
 Payroll Deduction \$25 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
 Transaction ID: SA11A1.4920

B. Douglas Dodson
 Full Name (Last, First, Middle Initial)
 Mailing Address: 4855 Raven Court
 City: Hilliard State: OH Zip Code: 43026
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 105.00
 Name of Employer: Motorists Mutual Insurance Companies Occupation: Manager
 Payroll Deduction \$15 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
 Transaction ID: SA11A1.4921

C. Craig Ebarwine
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1428 Sedgefield Dr.
 City: New Albany State: OH Zip Code: 43054
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 175.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Vice President
 Payroll Deduction \$25 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
 Transaction ID: SA11A1.4922

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 23	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Michael Finch Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 8857 Chateau Drive 09 30 2002

City State Zip Code Amount of Each Receipt this Period
 Pickerington OH 43147 105.00

FEC ID number of contributing federal political committee. Payroll Deduction \$15 Bi-weekly

Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$15 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Transaction ID: SA11A1.4923

B. Marc Hal Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 5888 Lane Road 09 30 2002

City State Zip Code Amount of Each Receipt this Period
 Centerburg OH 43011 105.00

FEC ID number of contributing federal political committee. Payroll Deduction \$15 Bi-weekly

Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$15 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Transaction ID: SA11A1.4926

C. Peter Hitecock Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 1409 Snowmass Road 09 30 2002

City State Zip Code Amount of Each Receipt this Period
 Columbus OH 43235 105.00

FEC ID number of contributing federal political committee. Payroll Deduction \$15 Bi-weekly

Name of Employer Motorists Mutual Insurance Company	Occupation Corporate Actuary	Payroll Deduction \$15 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Transaction ID: SA11A1.4927

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Paul Holmquist Date of Receipt
 Mailing Address: 5199 Owl Creek Drive
 City: Westerville State: OH Zip Code: 43081
 Amount of Each Receipt this Period: 105.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Corporate Counsel Payroll Deduction \$15 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
 Transaction ID: SA11A1.4928

B. Jeffrey Hoover Date of Receipt
 Mailing Address: 4556 Dirham Court
 City: Hilliard State: OH Zip Code: 43026
 Amount of Each Receipt this Period: 105.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Manager Payroll Deduction \$15 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
 Transaction ID: SA11A1.4929

C. Wallace Hyeel Date of Receipt
 Mailing Address: 5939 Coventry Hurst Lane
 City: Hilliard State: OH Zip Code: 43026
 Amount of Each Receipt this Period: 105.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Manager Payroll Deduction \$15 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
 Transaction ID: SA11A1.4930

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. David Kaufman Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 7925 Greenside Lane 09 30 2002

City State Zip Code
 Worthington OH 43235 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 210.00

Name of Employer Occupation Payroll Deduction \$30 Bi-weekly
 Motorists Mutual Insurance Company Sr. Vice President, CIO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Transaction ID: SA11A1.4932

B. John Kessler Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 3910 Caswell Road 09 30 2002

City State Zip Code
 Johnstown OH 43031 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 140.00

Name of Employer Occupation Payroll Deduction \$20 Bi-weekly
 Motorists Mutual Insurance Company Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Transaction ID: SA11A1.4933

C. Anne King Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 6934 Roundwood Ct 09 30 2002

City State Zip Code
 Dublin OH 43016 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 105.00

Name of Employer Occupation Payroll Deduction \$15 Bi-weekly
 Motorists Mutual Insurance Company Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.4934

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 23

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)

A. Teresa King

Mailing Address

1139 Tidewater Court

City

State

Zip Code

Westerville

OH

43082

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

105.00

FEC ID number of contributing
federal political committee.

Name of Employer
Motorists Insurance Companies

Occupation
Manager

Payroll Deduction \$15 Bi-
weekly

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: SA11A1.4935

Full Name (Last, First, Middle Initial)

B. Russell Krebs

Mailing Address

15 Kim Court East

City

State

Zip Code

Westerville

OH

43081

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

105.00

FEC ID number of contributing
federal political committee.

Name of Employer
Motorists Insurance Companies

Occupation
Manager

Payroll Deduction \$15 Bi-
weekly

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: SA11A1.4937

Full Name (Last, First, Middle Initial)

C. Todd Long

Mailing Address

1002 Loch Ness Avenue

City

State

Zip Code

Worthington

OH

43285

Date of Receipt

N M / D E / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

105.00

FEC ID number of contributing
federal political committee.

Name of Employer
Motorists Mutual Insurance Company

Occupation
Manager

Payroll Deduction \$15 Bi-
weekly

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: SA11A1.4938

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
 Orville Lyons, II

Mailing Address
 1165 Starbuck Ct.

City State Zip Code
 Westerville OH 43081

Date of Receipt
 N M / D E / Y Y Y Y
 09 30 2002

Amount of Each Receipt this Period
 189.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll Deduction \$27 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 540.00

Transaction ID: SA11A1.4939

B. Full Name (Last, First, Middle Initial)
 Joseph Merkal

Mailing Address
 5725 Ballymead Blvd.

City State Zip Code
 Dublin OH 43016

Date of Receipt
 N M / D E / Y Y Y Y
 09 30 2002

Amount of Each Receipt this Period
 105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.4940

C. Full Name (Last, First, Middle Initial)
 Mark Nixon

Mailing Address
 662 East Fifth Avenue

City State Zip Code
 Lancaster OH 43130

Date of Receipt
 N M / D E / Y Y Y Y
 09 30 2002

Amount of Each Receipt this Period
 105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.4941

SUBTOTAL of Receipts This Page (optional) ▶ **399.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 23	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Thomas Dgg Date of Receipt

Mailing Address N M / D C / Y Y Y Y
1D187 Chelton Wood 09 30 2002

City State Zip Code
Powell OH 43065 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 280.00

Name of Employer Motorists Mutual Insurance Company	Occupation Secretary	Payroll Deduction \$40 Bi-weekly
Receipt For: Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	800.00	Transaction ID: SA11A1.4942

B. Paul Richards Date of Receipt

Mailing Address N M / D C / Y Y Y Y
287 Weatherburn Ct. 09 30 2002

City State Zip Code
Powell OH 43065 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 105.00

Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$15 Bi-weekly
Receipt For: Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	300.00	Transaction ID: SA11A1.4943

C. Randolph Rudowicz Date of Receipt

Mailing Address N M / D C / Y Y Y Y
1026 Loch Ness Avenue 09 30 2002

City State Zip Code
Worthington OH 43065 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 175.00

Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$25 Bi-weekly
Receipt For: Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	500.00	Transaction ID: SA11A1.4944

SUBTOTAL of Receipts This Page (optional)	560.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
Karen Schwartz

Mailing Address
1252 Pond Hollow Lane

City State Zip Code
New Albany OH 43054

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
175.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll Deduction \$25 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

Transaction ID: **SA11A1.4946**

B. Full Name (Last, First, Middle Initial)
Ralph Smithers, Jr.

Mailing Address
4319 Portobello Drive

City State Zip Code
Gahanna OH 43230

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Transaction ID: **SA11A1.4947**

C. Full Name (Last, First, Middle Initial)
Charles Stapleton

Mailing Address
12738 Wheaton Avenue

City State Zip Code
Pickerington OH 43147

Date of Receipt
 N M / D E / Y Y Y Y
09 30 2002

Amount of Each Receipt this Period
175.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll Deduction \$25 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

Transaction ID: **SA11A1.4948**

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 15 / 23
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Duane Swartz
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1505 Clubview Blvd., S.
 City: Columbus State: OH Zip Code: 43235
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 210.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Senior Vice President
 Payroll Deduction \$30 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00
 Transaction ID: SA11A1.4949

B. James Vermilion
 Full Name (Last, First, Middle Initial)
 Mailing Address: 819 Byron Avenue
 City: Columbus State: OH Zip Code: 43227
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 245.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Vice President
 Payroll Deduction \$35 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00
 Transaction ID: SA11A1.4950

C. Richard Watson
 Full Name (Last, First, Middle Initial)
 Mailing Address: 3249 Scioto Run Blvd.
 City: Hilliard State: OH Zip Code: 43026
 Date of Receipt: 09 / 30 / 2002
 Amount of Each Receipt this Period: 175.00
 Name of Employer: Motorists Mutual Insurance Company Occupation: Vice President
 Payroll Deduction \$25 Bi-weekly
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
 Transaction ID: SA11A1.4951

SUBTOTAL of Receipts This Page (optional) ▶ **630.00**
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
 Peter Weisenberger

Date of Receipt
 N M / D E / Y Y Y Y
 09 / 30 / 2002

Mailing Address
 7105 Lakebrook Blvd.

City State Zip Code
 Columbus OH 43235

Amount of Each Receipt this Period
 140.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll Deduction \$20 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Transaction ID: SA11A1.4952

B. Full Name (Last, First, Middle Initial)
 Charles Wicker

Date of Receipt
 N M / D E / Y Y Y Y
 09 / 30 / 2002

Mailing Address
 1229 Smiley Court

City State Zip Code
 Westerville OH 43081

Amount of Each Receipt this Period
 210.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll Deduction \$30 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Transaction ID: SA11A1.4953

C. Full Name (Last, First, Middle Initial)
 Charles Williams

Date of Receipt
 N M / D E / Y Y Y Y
 09 / 30 / 2002

Mailing Address
 80 Barleycorn Drive

City State Zip Code
 Sunbury OH 43074

Amount of Each Receipt this Period
 105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Manager

Payroll Deduction \$15 Bi-weekly

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.4954

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)

A. Michael Wiseman

Mailing Address

9D Timberknoll Loop

City

State

Zip Code

Powell

OH

43065

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2002

Amount of Each Receipt this Period

245.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Treasurer

Payroll Deduction \$35 Bi-
weekly

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Transaction ID: SA11A1.4955

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	245.00
TOTAL This Period (last page this line number only)	▶	5488.00

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

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

FOR LINE NUMBER:
(check only one)

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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				

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. LifePAC		Date of Disbursement 09 / 30 / 2002	
Mailing Address 101 Constitution Avenue, N.W. City: Washington State: DC Zip Code: 20001		Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4998	
State: District:			

Full Name (Last, First, Middle Initial) B. Pat Tiberi for Congress		Date of Disbursement 09 / 30 / 2002	
Mailing Address 2021 E. Dublin Granville Road City: Columbus State: OH Zip Code: 43229		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: x House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4995	
State: OH District: 12			

C.

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	600.00

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

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

FOR LINE NUMBER:
(check only one)

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 26 27 28a 28b 28c 29

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NAME OF COMMITTEE (in full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Citizens for Dave Dobos		Date of Disbursement 09 / 16 / 2002
Mailing Address 3721 Whitworth Way City: Columbus State: OH Zip Code: 43228		Amount of Each Disbursement this Period 100.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4982
State: District:		

Full Name (Last, First, Middle Initial) B. Citizens for Hottinger		Date of Disbursement 09 / 16 / 2002
Mailing Address 386 Sabrecliff Drive City: Newark State: OH Zip Code: 43056		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4979
State: District:		

Full Name (Last, First, Middle Initial) C. Citizens for Householder		Date of Disbursement 09 / 13 / 2002
Mailing Address 138 High Street City: Glenford State: OH Zip Code: 43739		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4978
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1100.00
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 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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Citizens for Jim Trakas		Date of Disbursement 08 / 07 / 2002	
Mailing Address 6824 Brettin Court City Independence State OH Zip Code 44131		Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement State Political Contribution Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: SB29.4969

Full Name (Last, First, Middle Initial) B. Citizens for Larry Wolpert		Date of Disbursement 08 / 13 / 2002	
Mailing Address 100 South Third Street City Columbus State OH Zip Code 43215		Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement State Political Contribution Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: SB29.4977

Full Name (Last, First, Middle Initial) C. Committee for Blasdel		Date of Disbursement 08 / 05 / 2002	
Mailing Address 16428 Harvard Avenue City East Liverpool State OH Zip Code 43920		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement State Political Contribution Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: SB29.4965

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
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 21 / 23

<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 checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Committee for Common Pleas Judge Lisa Sadler		Date of Disbursement 09 / 03 / 2002
Mailing Address 100 South Third Street City: Columbus State: OH Zip Code: 43215		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4976
State: District:		

Full Name (Last, First, Middle Initial) B. Committee for Larry Flowers		Date of Disbursement 09 / 23 / 2002
Mailing Address 372 Birchwood Lane City: Westerville State: OH Zip Code: 43081		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4989
State: District:		

Full Name (Last, First, Middle Initial) C. Elect Clancy Committee		Date of Disbursement 08 / 13 / 2002
Mailing Address 4474 Woodtrail Lane City: Cincinnati State: OH Zip Code: 45251		Amount of Each Disbursement this Period 125.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4970
State: District:		

SUBTOTAL of Disbursements This Page (optional)	875.00
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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Friends for Faber		Date of Disbursement 09 / 03 / 2002
Mailing Address 609 Royal Lane City State Zip Code Celina OH 45822		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4975
State: District:		

Full Name (Last, First, Middle Initial) B. GOP GOLF PAC		Date of Disbursement 08 / 13 / 2002
Mailing Address 11006 Reading Road Suite 101 City State Zip Code Sharonville OH 45251		Amount of Each Disbursement this Period 25.00
Purpose of Disbursement Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4972
State: District:		

Full Name (Last, First, Middle Initial) C. Lacey for State Senate		Date of Disbursement 09 / 23 / 2002
Mailing Address 865 Macon Alley City State Zip Code Columbus OH 43206		Amount of Each Disbursement this Period 100.00
Purpose of Disbursement State Political Contribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: SB29.4985
State: District:		

SUBTOTAL of Disbursements This Page (optional)	625.00
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 23 / 23

<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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. LIFE PAC		Date of Disbursement 08 / 19 / 2002	
Mailing Address 100 South Third Street City State Zip Code Columbus OH 43215		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement PAC Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: 5B29.4973	
State: District:			

Full Name (Last, First, Middle Initial) B. Ohio Republican Party Judicial Fund		Date of Disbursement 08 / 29 / 2002	
Mailing Address 145 East Rich Street, 3rd Floor City State Zip Code Columbus OH 43215		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: 5B29.4983	
State: District:			

Full Name (Last, First, Middle Initial) C. Stratton for Supreme Court Committee		Date of Disbursement 08 / 06 / 2002	
Mailing Address 372 Birchwood Lane City State Zip Code Westerville OH 43081		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement State Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	Transaction ID: 5B29.4986	
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	7500.00