



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="200037.96"/>	<input type="text" value="200037.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="183157.84"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="84044.16"/>	<input type="text" value="97864.04"/>
(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="267202.00"/>	<input type="text" value="297902.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="45528.00"/>	<input type="text" value="76228.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="221674.00"/>	<input type="text" value="221674.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period: From: 04 / 01 / 2016 To: 06 / 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).....	49780.00	60915.00
(ii) Unitemized .....	34237.00	36897.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	84017.00	97812.00
(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 33, page 5) .....	84017.00	97812.00
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 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	27.16	52.04
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	84044.16	97864.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	84044.16	97864.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45500.00	76200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	28.00	28.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45528.00	76228.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45528.00	76228.00

**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) .....	84017.00	97812.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84017.00	97812.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Jeffrey Scott Altfillisch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2318 Asbury Sq  
 City Atlanta State GA Zip Code 30346-2400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Claims Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 20 / 2016  
**Transaction ID : SA11AI.8132**  
 Amount of Each Receipt this Period 245.00  
 Memo Item

**B. Joe Arbach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14384 320th Avenue  
 City Hoven State SD Zip Code 57450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Insurance sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2016  
**Transaction ID : SA11AI.8135**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Scott Arnold**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 Alderwood Dr SW  
 City Altoona State IA Zip Code 50009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail, LLC Occupation Marketing Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 04 / 20 / 2016  
**Transaction ID : SA11AI.8182**  
 Amount of Each Receipt this Period 445.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1190.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Joseph Bafia**  
Full Name (Last, First, Middle Initial)

Mailing Address 2613 Daluty Drive

City Raleigh State NC Zip Code 27604

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

Name of Employer Rain & Hail LLC Occupation Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2016  
**Transaction ID : SA11AI.8141**

Amount of Each Receipt this Period 250.00

Memo Item

**B. Randy C. Barr**  
Full Name (Last, First, Middle Initial)

Mailing Address 4130 SE 34th Terr

City Topeka State KS Zip Code 66605

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

Name of Employer Great American Insurance Co. Occupation Underwriter Analyst Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2016  
**Transaction ID : SA11AI.8172**

Amount of Each Receipt this Period 300.00

Memo Item

**C. Craig Bartling**  
Full Name (Last, First, Middle Initial)

Mailing Address 4408 104th St, Unit 4

City Urbandale State IA Zip Code 50322

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

Name of Employer Rain & Hail LLC Occupation Claims supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt 04 / 06 / 2016  
**Transaction ID : SA11AI.8100**

Amount of Each Receipt this Period 445.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 995.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Russell Bean**

Mailing Address PO Box 480

City State Zip Code  
Augusta MI 59410

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

Name of Employer Occupation  
Rain & Hail Insurance Claims Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 20 / 2016  
**Transaction ID : SA11AI.8180**

Amount of Each Receipt this Period  
245.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Terry Lee Beans**

Mailing Address 42875 Road 763

City State Zip Code  
Lexington NE 68850

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

Name of Employer Occupation  
NAU Country Insurance Adjuster

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 20 / 2016  
**Transaction ID : SA11AI.8191**

Amount of Each Receipt this Period  
245.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Guri Bhangoo**

Mailing Address 10656 N. Old Course Drive

City State Zip Code  
Fresno CA 93720

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

Name of Employer Occupation  
Rain & Hail, LLC Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016  
**Transaction ID : SA11AI.8120**

Amount of Each Receipt this Period  
245.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00 245.00 <b>735.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Robert Bird**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4260 Lanewood Lane, N.  
 City Plymouth State MN Zip Code 55446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Marketing Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **445.00**

Date of Receipt **04 / 20 / 2016**  
**Transaction ID : SA11AI.8175**  
 Amount of Each Receipt this Period **445.00**  
 Memo Item

**B. Robert J. Black**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6521 Cheslie Court  
 City Johnston State IA Zip Code 50131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail, LLC Occupation Asst Nat'l Claims Mgr  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **445.00**

Date of Receipt **04 / 06 / 2016**  
**Transaction ID : SA11AI.8176**  
 Amount of Each Receipt this Period **445.00**  
 Memo Item

**C. Ricky L. Bogan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1402 US Hwy 385  
 City Julesburg State CO Zip Code 80737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Occupation Claims Rep  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **245.00**

Date of Receipt **05 / 05 / 2016**  
**Transaction ID : SA11AI.8174**  
 Amount of Each Receipt this Period **245.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1135.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Ralph G. Bone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3600 Minnesota Drive  
 City Edina State MN Zip Code 55435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Guy Carpenter & Co. Occupation Crop insurance sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2016  
**Transaction ID : SA11AI.8169**  
 Amount of Each Receipt this Period  
 4500.00  
 Memo Item

**B. Dale Borrer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2723 Pomona Drive  
 City Eau Claire State WI Zip Code 54701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FCIA Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : SA11AI.8103**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Stephen Braddock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 5th Street North  
 City Swea City State IA Zip Code 50590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Ins Co Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2016  
**Transaction ID : SA11AI.8186**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Chad Byrd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 851  
 City Farwell State TX Zip Code 79325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Ins Occupation Marketing Supervisor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **245.00**

Date of Receipt **05 / 05 / 2016**  
**Transaction ID : SA11AI.8097**  
 Amount of Each Receipt this Period **245.00**  
 Memo Item

**B. Anthony Catalano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4701 153rd Court  
 City Urbandale State IA Zip Code 50323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Senior VP of Agriculture  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **445.00**

Date of Receipt **05 / 21 / 2016**  
**Transaction ID : SA11AI.8082**  
 Amount of Each Receipt this Period **445.00**  
 Memo Item

**C. James Cockle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3455 Westridge Pl  
 City Wenatchee State WA Zip Code 98801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Insurance Adjuster  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt **06 / 11 / 2016**  
**Transaction ID : SA11AI.8125**  
 Amount of Each Receipt this Period **270.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>960.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial) <b>A. Donald F Connealy</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2016 <b>Transaction ID : SA11AI.8110</b>
Mailing Address 206 Ridgewood Drive		Amount of Each Receipt this Period 300.00
City Council Bluffs	State IA	Zip Code 51503
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Agro National	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Jimmy Copous</b>		Date of Receipt MM / DD / YYYY 04 / 20 / 2016 <b>Transaction ID : SA11AI.8134</b>
Mailing Address 3122 McAllister St		Amount of Each Receipt this Period 245.00
City Milan	State TN	Zip Code 38350
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer NAU Country Insurance	Occupation Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) <b>C. Brad Darling</b>		Date of Receipt MM / DD / YYYY 04 / 20 / 2016 <b>Transaction ID : SA11AI.8086</b>
Mailing Address 5005 Forest Hill Dr		Amount of Each Receipt this Period 245.00
City Monroe	State GA	Zip Code 30655
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Rain & Hail	Occupation Claims/QC Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	790.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Michael J. Davenport**

Mailing Address 470 Eastgate Lane

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Agri General Insurance Svc Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
495.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8160**

Amount of Each Receipt this Period  
495.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Brian Davis**

Mailing Address 92 Yesteryear Court

City State Zip Code  
Angier NC 27501

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

Name of Employer Occupation  
Rain & Hail Asst. Claims Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016  
**Transaction ID : SA11AI.8091**

Amount of Each Receipt this Period  
245.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Janet R. Dawson**

Mailing Address 3398 Meadow Green Road

City State Zip Code  
Danbury WI 54830

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

Name of Employer Occupation  
QBE NAU Country Insurance Sr. 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 Y Y  
 05 / 11 / 2016  
**Transaction ID : SA11AI.8129**

Amount of Each Receipt this Period  
350.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1090.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Michael Deal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27284 110th St, NW  
 City State Zip Code  
 Zimmerman MN 55398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NAU Country Insurance VP-Technology  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2016  
**Transaction ID : SA11AI.8156**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Jay W Domer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4235 NW Green Hills Road  
 City State Zip Code  
 Topeka KS 66618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NAU Country Insurance Regional Mgr  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2016  
**Transaction ID : SA11AI.8131**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Wade Eslinger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 516 East Naves Street  
 City State Zip Code  
 Boyd WI 54726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Great American Insurance Co. Claims Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : SA11AI.8196**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Craig Eversole**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 Cedar Avenue  
 City Morton State IL Zip Code 62550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Insurance Co. Occupation Claims Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **05 / 11 / 2016**  
**Transaction ID : SA11AI.8101**  
 Amount of Each Receipt this Period **400.00**  
 Memo Item

**B. Dale R. Feilmeier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2468 230th Street  
 City Early State IA Zip Code 50535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Crop Adjuster/Claims Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 11 / 2016**  
**Transaction ID : SA11AI.8104**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

**C. Bradley A. Fink**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3825 SW Indian Hills Rd  
 City Topeka State KS Zip Code 66610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Insurance Occupation Regional claims adjuster  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **06 / 09 / 2016**  
**Transaction ID : SA11AI.8088**  
 Amount of Each Receipt this Period **400.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Jamie Finlayson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 133 Ossabaw Lane  
 City Leesburg State GA Zip Code 31763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Crop Insurance Occupation Claims Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2016  
**Transaction ID : SA11AI.8128**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Dennis Fladstol**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21938 Midway Road E  
 City Conrad State MT Zip Code 59425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Co. Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2016  
**Transaction ID : SA11AI.8109**  
 Amount of Each Receipt this Period  
 295.00  
 Memo Item

**C. Erin Flemmer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11946 NW 142nd St  
 City Granger State IA Zip Code 50109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Programmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8114**  
 Amount of Each Receipt this Period  
 245.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	790.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial) <b>A. Shannon Foster</b>		Date of Receipt MM / DD / YYYY 04 / 22 / 2016 <b>Transaction ID : SA11AI.8185</b>
Mailing Address 1811 SW Arlan Dr		Amount of Each Receipt this Period 495.00
City Ankeny	State IA	Zip Code 50023
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Rain & Hail Insurance	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

Full Name (Last, First, Middle Initial) <b>B. Jason Gama</b>		Date of Receipt MM / DD / YYYY 04 / 06 / 2016 <b>Transaction ID : SA11AI.8130</b>
Mailing Address 1605 Aspen Drive		Amount of Each Receipt this Period 245.00
City Washington	State IL	Zip Code 61571
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Great American Insurance Co.	Occupation Claims Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) <b>C. Dan Gasser</b>		Date of Receipt MM / DD / YYYY 04 / 21 / 2016 <b>Transaction ID : SA11AI.8105</b>
Mailing Address 1025 N E Moss Point Road		Amount of Each Receipt this Period 1500.00
City Lees Summit	State MO	Zip Code 64064
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Hudson Crop Insurance	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2240.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Thomas L. Gattis**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 Kokomo St

City Plainview State TX Zip Code 79072

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

Name of Employer Ag Venture Solutions Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2016

**Transaction ID : SA11AI.8192**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Craig Gonzalez**  
Full Name (Last, First, Middle Initial)

Mailing Address 2850 24th Court

City Kinsburg State CA Zip Code 93631

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

Name of Employer Rain & Hail Occupation Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016

**Transaction ID : SA11AI.8102**

Amount of Each Receipt this Period  
 445.00

Memo Item

**C. Pete Graham**  
Full Name (Last, First, Middle Initial)

Mailing Address 6438 North 7th Street

City Fresno State CA Zip Code 93710

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

Name of Employer Great American Ins Co Occupation Regional claims manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2016

**Transaction ID : SA11AI.8166**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	945.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Melvin Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8802 ECR 6000  
 City Idalou State TX Zip Code 79329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hudson Group Occupation Claims Manager  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 05 / 21 / 2016  
**Transaction ID : SA11AI.8155**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Edward Gribben**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28903 Limestone Circle  
 City Coarsegold State CA Zip Code 93614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail, LLC Occupation Agent  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 245.00

Date of Receipt 04 / 06 / 2016  
**Transaction ID : SA11AI.8112**  
 Amount of Each Receipt this Period 245.00  
 Memo Item

**C. Gene R. Grimsley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1221 Military Avenue  
 City Council Bluffs State IA Zip Code 51503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Regional Marketing Rep  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 05 / 09 / 2016  
**Transaction ID : SA11AI.8117**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 745.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Joe E. Grindstaff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5330 Roan Creek Rd  
 City Mountain City State TN Zip Code 37683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Field Claims Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11AI.8137**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Jackie Hager**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4792 Harvest Drive South  
 City Fargo State ND Zip Code 58104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Insurance Co. Occupation Crop Ins Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2016  
**Transaction ID : SA11AI.8124**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Hunter Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8812 Wooded Point Dr  
 City Johnston State IA Zip Code 50131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Svcs Occupation Claims Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : SA11AI.8122**  
 Amount of Each Receipt this Period  
 495.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1045.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Pat Hanisch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 N. Connor Trail  
 City State Zip Code  
 Sioux Falls SD 57103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rain & Hail Insurance Agent  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : SA11AI.8164**  
 Amount of Each Receipt this Period  
 245.00  
 Memo Item

**B. Eric Hansen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6641 US Highway 89  
 City State Zip Code  
 Belt MT 59412-8431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Great American Insurance Co. Claims Adjuster  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : SA11AI.8113**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**c. Phillip S. Hardt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 508 450th St  
 City State Zip Code  
 Swea City IL 50590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Great American Ins Agent  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2016  
**Transaction ID : SA11AI.8167**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	995.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Brooke Hedrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 9200 Northpark Dr, Ste 100

City Johnston	State IA	Zip Code 50131
------------------	-------------	-------------------

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

Name of Employer Rain & Hail	Occupation Lead web administrator
---------------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8094**

Amount of Each Receipt this Period  
 245.00

Memo Item

**B. Gary Heilig Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 23903 East Winter Pine Lane

City Newman Lake	State WA	Zip Code 99025
---------------------	-------------	-------------------

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

Name of Employer Rain & Hail LLC	Occupation Claims Manager
-------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8116**

Amount of Each Receipt this Period  
 445.00

Memo Item

**C. Larry Heitman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8628

City Woodland	State CA	Zip Code 95695
------------------	-------------	-------------------

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

Name of Employer California Crop Ins Svcs	Occupation Executive VP
--	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11AI.8149**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1690.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Monte R. Holl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1715 S 167th Cir  
 City Omaha State NE Zip Code 68130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation VP, Agent Technology Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 02 / 2016  
**Transaction ID : SA11AI.8162**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Terry Hudson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1511 Rosenkranz Rd  
 City Tieton State WA Zip Code 98947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 11 / 2016  
**Transaction ID : SA11AI.8190**  
 Amount of Each Receipt this Period 245.00  
 Memo Item

**C. Randy R. Humfeld**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address E 3498 Humfeld Lane  
 City Chaseburg State WI Zip Code 54621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Field Claims Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2016  
**Transaction ID : SA11AI.8173**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 745.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Clinton Isaackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2839 270th Street  
 City Marshall State MN Zip Code 56258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Occupation Regional Claims Manager  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 05 / 20 / 2016  
**Transaction ID : SA11AI.8099**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Shane Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 56  
 City Wildorado State TX Zip Code 79098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail LLC Occupation Claims supervisor  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 245.00

Date of Receipt 04 / 08 / 2016  
**Transaction ID : SA11AI.8184**  
 Amount of Each Receipt this Period 245.00  
 Memo Item

**C. Douglas M. Jakway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 439 Woodlawn Ave.  
 City St. Paul State MN Zip Code 55105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Ins Occupation General Counsel  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 300.00

Date of Receipt 05 / 09 / 2016  
**Transaction ID : SA11AI.8111**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	795.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Jon W. James**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4824 E. Hart Lane  
City Chillicothe State IL Zip Code 61523  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rain & Hail Insurance Occupation Vice President, Claims  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 745.00

Date of Receipt 04 / 08 / 2016  
**Transaction ID : SA11AI.8140**  
Amount of Each Receipt this Period 745.00  
 Memo Item

**B. Kenneth Janicek**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8515 - 12th Ave  
City Plattsmouth State NE Zip Code 68048  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Agro National Occupation Director, Field Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 09 / 2016  
**Transaction ID : SA11AI.8142**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Nanette Joiner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4821 Lakecrest Drive  
City Shawnee State KS Zip Code 66218  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hudson Insurance Group Occupation U.W. Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 295.00

Date of Receipt 04 / 22 / 2016  
**Transaction ID : SA11AI.8163**  
Amount of Each Receipt this Period 295.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2040.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Michael Kelley**

Mailing Address 3910 Brockton Drive

City State Zip Code  
Cincinnati OH 45251

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

Name of Employer Occupation  
Great American Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : SA11AI.8157**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Christopher Kluge**

Mailing Address 3895 Glacier Court

City State Zip Code  
Minnestrista MN 55375

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

Name of Employer Occupation  
Rain & Hail Claims Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8098**

Amount of Each Receipt this Period  
245.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Todd Koosman**

Mailing Address 1205 Adrian Drive

City State Zip Code  
Chaska MN 55318

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

Name of Employer Occupation  
Rain & Hail LLC Marketing Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8195**

Amount of Each Receipt this Period  
245.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	990.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial) <b>A. James Korin</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2016
Mailing Address 7938 Maple Hill Rd		<b>Transaction ID : SA11AI.8127</b>
City Corcoran	State MN	Zip Code 55340
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NAU Country Insurance	Occupation CFO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Glen Krebs</b>		Date of Receipt MM / DD / YYYY 05 / 21 / 2016
Mailing Address 600 23rd Street South		<b>Transaction ID : SA11AI.8119</b>
City Great Falls	State MT	Zip Code 56208
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 270.00	
Name of Employer Self	Occupation Crop Adjuster	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Lager</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2016
Mailing Address 7912 Grinnell Way		<b>Transaction ID : SA11AI.8150</b>
City Lakeville	State MN	Zip Code 55044
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Crop Revenue Consultants, Inc.	Occupation Crop Insurance Sales	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1770.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. John R. Larson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 73578 280th Street  
 City Danube State MN Zip Code 56230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Insurance Co. Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2016  
**Transaction ID : SA11AI.8139**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Michael Legleiter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18409 Pasadena Ave  
 City Omaha State NE Zip Code 68130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail, LLC Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2016  
**Transaction ID : SA11AI.8159**  
 Amount of Each Receipt this Period  
 495.00  
 Memo Item

**C. Bill Lorimer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16164 Raven Street, NW  
 City Andover State MN Zip Code 55304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Occupation Supv, Branch Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11AI.8084**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Howard V. Maier**

Mailing Address 3985 W. Eaglerock Dr.

City Wenatchee	State WA	Zip Code 98801-9066
-------------------	-------------	------------------------

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

Name of Employer Rain & Hail Insurance	Occupation Adjuster
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2016**

**Transaction ID : SA11AI.8121**

Amount of Each Receipt this Period  
**240.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Michael R. Mason**

Mailing Address PO Box 191

City Highmore	State SD	Zip Code 57345
------------------	-------------	-------------------

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

Name of Employer Great American Insurance Co.	Occupation Marketing rep
--	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2016**

**Transaction ID : SA11AI.8161**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Phyllis Mason**

Mailing Address 14215 Ivory Avenue

City Pattonburg	State MO	Zip Code 64670
--------------------	-------------	-------------------

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

Name of Employer Great American Crop Insurance	Occupation Field 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 Y  
**05 / 07 / 2016**

**Transaction ID : SA11AI.8168**

Amount of Each Receipt this Period  
**250.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>740.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Mark A Masters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 4th Ave. South  
 City State Zip Code  
 Great Falls MT 59403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NAU Country Insurance Claims Mgr  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11AI.8152**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Brock Maus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1630 Ash Place  
 City State Zip Code  
 West Fargo ND 58078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NAU Country Insurance Software engineer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2016  
**Transaction ID : SA11AI.8093**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Tim McGrew**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1729 Woodside Drive  
 City State Zip Code  
 Woodland CA 95695  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NAU Country Insurance Crop Insurance Adjuster  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11AI.8193**  
 Amount of Each Receipt this Period  
 350.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Bradley A. Meyer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9153 NW 73rd Street  
 City Johnston State IA Zip Code 50131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 445.00

Date of Receipt 05 / 12 / 2016  
**Transaction ID : SA11AI.8087**  
 Amount of Each Receipt this Period 445.00  
 Memo Item

**B. William G. Moore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2289 E Maddox Rd  
 City Buford State GA Zip Code 30519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Division Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 445.00

Date of Receipt 05 / 12 / 2016  
**Transaction ID : SA11AI.8199**  
 Amount of Each Receipt this Period 445.00  
 Memo Item

**C. Mark O. Mossman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11295 240th Avenue  
 City Zimmerman State MN Zip Code 55398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Insurance Occupation VP Claims  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 500.00

Date of Receipt 05 / 06 / 2016  
**Transaction ID : SA11AI.8154**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1390.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Danny D Mostad**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9315 Manilla Rd  
City Langdon State ND Zip Code 58249  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mostad Ins Services Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2016  
Transaction ID : SA11AI.8106  
Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Kristina Munoz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6040 NW Topeka Blvd  
City Topeka State KS Zip Code 66617  
FEC ID number of contributing federal political committee. **C**  
Name of Employer QBE NAU Insurance Co. Occupation Compliance Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2016  
Transaction ID : SA11AI.8147  
Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Scott R. Norrish**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2848 Kohlhepp Road  
City Eau Claire State WI Zip Code 54703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NAU Country Insurance Occupation Claims Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2016  
Transaction ID : SA11AI.8183  
Amount of Each Receipt this Period 500.00  
 Memo Item

**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: (check only one)	PAGE 34 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. William Oleaga**  
Full Name (Last, First, Middle Initial)

Mailing Address 2415 E 58th Court

City Spokana State WA Zip Code 99223

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

Name of Employer Rain & Hail Insurance Occupation Asst. Claims Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2016

**Transaction ID : SA11AI.8197**

Amount of Each Receipt this Period  
 245.00

Memo Item

**B. Carla Pederson**  
Full Name (Last, First, Middle Initial)

Mailing Address 14859 Maple Inn Rd, SE

City Mentor State MN Zip Code 56736

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

Name of Employer Mayport Insurance & Realty Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2016

**Transaction ID : SA11AI.8095**

Amount of Each Receipt this Period  
 300.00

Memo Item

**C. Toby Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 9556 Beerbower Rd

City Edgerton State OH Zip Code 43517

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

Name of Employer QBE NAU Insurance Co. Occupation Field Claims Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016

**Transaction ID : SA11AI.8194**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	795.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Kevin Powers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1853 County Road 11  
 City Panhandle State TX Zip Code 79068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016  
**Transaction ID : SA11AI.8145**  
 Amount of Each Receipt this Period  
 445.00  
 Memo Item

**B. Michael Rath**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35449 103rd St  
 City Longlake State SD Zip Code 57457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Insurance Co. Occupation Claims 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 Y  
 04 / 08 / 2016  
**Transaction ID : SA11AI.8158**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Mark Rentz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27439 750th Ave  
 City St. James State MN Zip Code 56081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Insurance Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2016  
**Transaction ID : SA11AI.8151**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	945.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Mark Rieger**

Mailing Address 16410 59th Street, SE

City State Zip Code  
Walcott ND 58077

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

Name of Employer Occupation  
Great American Ins Company Crop adjuster

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2016

**Transaction ID : SA11AI.8153**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Ronald Rohling**

Mailing Address 884 Havenwood Ct

City State Zip Code  
Crescent Springs KY 41017

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

Name of Employer Occupation  
Great American Ins Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2016

**Transaction ID : SA11AI.8179**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Carrie E. Rumpza**

Mailing Address 135 Terry Drive

City State Zip Code  
Webster SD 57274

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

Name of Employer Occupation  
Great American Insurance Co. Adjuster

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 08 / 2016

**Transaction ID : SA11AI.8096**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Barry Scarborough**  
Full Name (Last, First, Middle Initial)

Mailing Address 3968 Gerber Dairy Road

City Winter Haven State FL Zip Code 33880

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

Name of Employer Rain & Hail, LLC Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 12 / 2016  
**Transaction ID : SA11AI.8083**

Amount of Each Receipt this Period 245.00

Memo Item

**B. Dave Schuler**  
Full Name (Last, First, Middle Initial)

Mailing Address 14422 Oakwood Dr

City Urbandale State IA Zip Code 50323

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

Name of Employer Rain & Hail LLC Occupation Natl Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.8107**

Amount of Each Receipt this Period 900.00

Memo Item

**C. Bradley W. Sharp**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 941

City Wilmington State OH Zip Code 45177

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

Name of Employer Diversified Insurance Occupation Crop insurance sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 05 / 04 / 2016  
**Transaction ID : SA11AI.8089**

Amount of Each Receipt this Period 1300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2445.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial) <b>A. Kenneth W. Shultz</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2016
Mailing Address 9601 N. 75 E.		<b>Transaction ID : SA11AI.8143</b>
City Battle Ground	State IN	Zip Code 47920
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Great American Ins	Occupation Marketing Supervisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Kyle Sisk</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2016
Mailing Address PO Box 1230		<b>Transaction ID : SA11AI.8148</b>
City Idalou	State TX	Zip Code 79329
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NAU Country Insurance	Occupation Claims Supervisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Brittany L. Smith</b>		Date of Receipt MM / DD / YYYY 05 / 12 / 2016
Mailing Address 1711 South Highway 17		<b>Transaction ID : SA11AI.8092</b>
City Spokane	State WA	Zip Code 99206
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 495.00	
Name of Employer Rain & Hail Insurance	Occupation AVP Marketing, Northwest Div	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Jim Snow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7206 Riley Road  
 City Macon State IL Zip Code 62544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Adjuster  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2016  
**Transaction ID : SA11AI.8133**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item

**B. Gerald Sondag**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 240 190th Ave, SW  
 City Council Bluffs State IA Zip Code 51503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Crop Adjuster  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2016  
**Transaction ID : SA11AI.8118**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Joe Survilla**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 Black Walnut Dr  
 City Mountain Top State PA Zip Code 18707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACE Agribusiness Occupation VP-Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2016  
**Transaction ID : SA11AI.8136**  
 Amount of Each Receipt this Period  
 450.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	925.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Kevin Svingen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 986 - 209 Main  
 City Rolla State ND Zip Code 58367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 First State Ins Agency Owner/Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2016  
**Transaction ID : SA11AI.8146**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Randall L. Thomas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3505 149th Street  
 City Urbandale State IA Zip Code 50323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rain & Hail, LLC VP - IT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2016  
**Transaction ID : SA11AI.8170**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Kerry L. Treimer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 817 West Trace Dr  
 City Polk City State IA Zip Code 50226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rain & Hail Insurance IT Specialist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2016  
**Transaction ID : SA11AI.8144**  
 Amount of Each Receipt this Period  
 245.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1745.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Robert J. Twomey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3414 West Legendary Run  
 City Cincinnati State OH Zip Code 45245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great American Insurance Co. Occupation VP, Claims  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 06 / 16 / 2016  
**Transaction ID : SA11AI.8177**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. William R. Ufer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 Kenmont Drive  
 City Holly Springs State NC Zip Code 27540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail LLC Occupation Division Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 450.00

Date of Receipt 05 / 08 / 2016  
**Transaction ID : SA11AI.8198**  
 Amount of Each Receipt this Period 450.00  
 Memo Item

**C. Patrick M. Umberger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55163 - 230th St.  
 City Glenwood State IA Zip Code 51534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Co. Occupation Lead Training Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 05 / 06 / 2016  
**Transaction ID : SA11AI.8165**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 1200.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. Randy Vogt**  
Full Name (Last, First, Middle Initial)

Mailing Address 1806 Quint Avenue

City State Zip Code  
Carroll IA 51401

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

Name of Employer Occupation  
Great American Insurance Co. Claims Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2016  
**Transaction ID : SA11AI.8171**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Hunter Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 395 Timber Lane

City State Zip Code  
Huntingdon TN 38344

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

Name of Employer Occupation  
Great American Insurance Co. Claims Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2016  
**Transaction ID : SA11AI.8123**

Amount of Each Receipt this Period  
245.00

Memo Item

**C. Steven J. Wedel**  
Full Name (Last, First, Middle Initial)

Mailing Address 3712 S. Morrill

City State Zip Code  
Spokane WA 99223

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

Name of Employer Occupation  
Rain & Hail LLC Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
495.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2016  
**Transaction ID : SA11AI.8187**

Amount of Each Receipt this Period  
495.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	990.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

**A. John Wienstroer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2217 Reinecke Ct  
 City Woodland State CA Zip Code 95776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAU Country Insurance Occupation VP Branch Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2016  
**Transaction ID : SA11AI.8138**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Tammy Wigham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4827 150th St  
 City Urbandale State IA Zip Code 50323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rain & Hail Insurance Occupation IT Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 12 / 2016  
**Transaction ID : SA11AI.8189**  
 Amount of Each Receipt this Period 245.00  
 Memo Item

**C. Bill Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33725 168th Street  
 City Honey Creek State IA Zip Code 51542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE NAU Insurance Occupation Senior VP, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2016  
**Transaction ID : SA11AI.8085**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	995.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. AUSTIN SCOTT FOR CONGRESS INC**

Mailing Address PO BOX 27750

City State Zip Code  
MACON GA 31221

Purpose of Disbursement

Candidate Name

**JAMES AUSTIN SCOTT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: GA District: 08

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2016

**Transaction ID : SB23.8208**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CITIZENS FOR COCHRAN**

Mailing Address PO BOX 7183

City State Zip Code  
TUPELO MS 38802

Purpose of Disbursement

Candidate Name

**THAD COCHRAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: MS District: 00

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SB23.8247**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CRAMER FOR CONGRESS**

Mailing Address PO BOX 396

City State Zip Code  
BISMARCK ND 58502

Purpose of Disbursement

Candidate Name

**KEVIN MR. CRAMER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ND District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2016

**Transaction ID : SB23.8245**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. DENHAM FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DR., #150

City State Zip Code  
SACRAMENTO CA 95833

Purpose of Disbursement

Candidate Name

**JEFF DENHAM**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2016

Transaction ID : **SB23.8229**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF BENNIE THOMPSON**

Mailing Address P.O. Box 100  
P.O. Box 100

City State Zip Code  
Bolton MS 39041

Purpose of Disbursement

Candidate Name

**BENNIE G THOMPSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 13 / 2016

Transaction ID : **SB23.8209**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF GLENN THOMPSON**

Mailing Address PO BOX 1112

City State Zip Code  
STATE COLLEGE PA 16804

Purpose of Disbursement

Candidate Name

**GLENN MR THOMPSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2016

Transaction ID : **SB23.8235**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<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)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. HEIDI FOR SENATE**

Mailing Address PO BOX 1577

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement

Candidate Name

**HEIDI HEITKAMP**

Office Sought:  House  Senate  President

State: ND District: 00

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2016

**Transaction ID : SB23.8234**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOEVEN FOR SENATE**

Mailing Address PO BOX 861

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement

Candidate Name

**JOHN HOEVEN**

Office Sought:  House  Senate  President

State: ND District: 00

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 13 / 2016

**Transaction ID : SB23.8211**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement

Candidate Name

**RICHARD L. JR. HUDSON**

Office Sought:  House  Senate  President

State: NC District: 08

Disbursement For: 2016  
 Primary  General  Other (specify) ▼  
Special-Primary

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2016

**Transaction ID : SB23.8214**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<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)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. JENKINS FOR CONGRESS**

Mailing Address PO BOX 727

City HUNTINGTON State WV Zip Code 25711

Purpose of Disbursement

Candidate Name  
**EVAN H JENKINS**

Office Sought:  House  Senate  President  
State: WV District: 03

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : **SB23.8222**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM COSTA FOR CONGRESS**

Mailing Address 2037 W Bullard Avenue # 355

City Fresno State CA Zip Code 93711

Purpose of Disbursement

Candidate Name  
**JIM MR. COSTA**

Office Sought:  House  Senate  President  
State: CA District: 20

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2016

Transaction ID : **SB23.8212**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KELLY FOR CONGRESS**

Mailing Address 5221-A CLIFF GOOKIN BLVD

City TUPELO State MS Zip Code 38801

Purpose of Disbursement

Candidate Name  
**JOHN TRENT KELLY**

Office Sought:  House  Senate  President  
State: MS District: 01

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 16 / 2016

Transaction ID : **SB23.8254**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement

Candidate Name

**KEVIN MCCARTHY**

Office Sought:  House  
 Senate  
 President

State: CA District: 23

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2016

Transaction ID : **SB23.8246**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KING FOR CONGRESS**

Mailing Address 126 Des Moines Street  
P.O. Box 576

City Odebolt State IA Zip Code 51458

Purpose of Disbursement

Candidate Name

**STEVE MR. KING**

Office Sought:  House  
 Senate  
 President

State: IA District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2016

Transaction ID : **SB23.8218**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LUCAS FOR CONGRESS**

Mailing Address Post Office Box 1726  
Post Office Box 1726

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement

Candidate Name

**FRANK D LUCAS**

Office Sought:  House  
 Senate  
 President

State: OK District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2016

Transaction ID : **SB23.8223**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement

Candidate Name

**MICHAEL BOST**

Office Sought:  House  
 Senate  
 President

State: IL District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2016

**Transaction ID : SB23.8258**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement

Candidate Name

**MICHAEL BOST**

Office Sought:  House  
 Senate  
 President

State: IL District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : SB23.8250**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE ROGERS FOR CONGRESS**

Mailing Address 123 EAST 13TH STREET

City Anniston State AL Zip Code 36201

Purpose of Disbursement

Candidate Name

**MICHAEL ROGERS**

Office Sought:  House  
 Senate  
 President

State: AL District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2016

**Transaction ID : SB23.8232**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. RALPH ABRAHAM FOR CONGRESS**

Mailing Address P.O. BOX 14062

City MONROE State LA Zip Code 71207

Purpose of Disbursement

Candidate Name

**RALPH LEE DR. JR. ABRAHAM**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: LA District: 05

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2016

**Transaction ID : SB23.8216**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RICK W. ALLEN FOR CONGRESS**

Mailing Address P. O. BOX 338

City AUGUSTA State GA Zip Code 30903

Purpose of Disbursement

Candidate Name

**RICHARD W ALLEN**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: GA District: 12

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2016

**Transaction ID : SB23.8256**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement

Candidate Name

**RODNEY L DAVIS**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2016

**Transaction ID : SB23.8231**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. RURAL AMERICA COUNTS PAC (RAC PAC)**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2016

Transaction ID : SB23.8255

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SANFORD BISHOP FOR CONGRESS**

Mailing Address P O BOX 909

City COLUMBUS State GA Zip Code 31902

Purpose of Disbursement

Candidate Name

**SANFORD D JR BISHOP**

Office Sought:  House  Senate  President

State: GA District: 02

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2016

Transaction ID : SB23.8224

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TIM WALZ FOR US CONGRESS**

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement

Candidate Name

**TIMOTHY J WALZ**

Office Sought:  House  Senate  President

State: MN District: 01

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2016

Transaction ID : SB23.8233

Amount of Each Disbursement this Period

1000.00

Memo Item

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

8000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)**

Full Name (Last, First, Middle Initial)

**A. VOTETIPTON.COM**

Mailing Address PO BOX 9949

City DENVER State CO Zip Code 80209

Purpose of Disbursement

Candidate Name

**SCOTT R. TIPTON**

Office Sought:  House  Senate  President

State: CO District: 03

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2016

**Transaction ID : SB23.8244**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. YODER FOR CONGRESS, INC**

Mailing Address PO BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement

Candidate Name

**KEVIN YODER**

Office Sought:  House  Senate  President

State: KS District: 03

Disbursement For: 2015  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

**Transaction ID : SB23.8236**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

2000.00

45500.00