



RECEIVED  
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2008 JUL 14 PM 12:02

July 8, 2008

Ms. Andrea Needles  
Federal Election Commission  
999E Street NW  
Washington, D.C. 20463

Re: OneBeacon Political Action Committee (Federal)  
FEC Identification Number C00205393  
June 30, 2008 2<sup>nd</sup> Quarter Report

Dear Ms. Needles:

On Behalf of OneBeacon Political Action Committee (Federal), I have enclosed its  
June 30, 2008 2<sup>nd</sup> Quarter Report.

Sincerely,

A handwritten signature in cursive script that reads 'Todd Mills'.

Todd Mills  
Treasurer

28039772058

**FEC  
FORM 3X**

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

RECEIVED  
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2008 JUL 14 PM 12:02

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

ONE BEACON POLITICAL ACTION COMMITTEE (FEDERAL)

ADDRESS (number and street)

ONE BEACON LANE



Check if different than previously reported. (ACC)

CANTON

MA

02108-3100

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00205393

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

**TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
  - Convention (12C)
  - General (12G)
  - Special (12S)
  - Runoff (12R)
- Election on \_\_\_\_\_ in the State of \_\_\_\_\_

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

- General (30G)
  - Runoff (30R)
  - Special (30S)
- Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period

04 / 01 / 2008 through 06 / 30 / 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Todd Mills

Signature of Treasurer *Todd Mills*

Date 07 / 08 / 2008

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

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

28039772059

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*ONE BEACON Political Action Committee*

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2008

To:

MM / DD / YYYY  
06 / 30 / 2008

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2008	2,801.95	2,801.95
(b) Cash on Hand at Beginning of Reporting Period.....	2,801.95	
(c) Total Receipts (from Line 19) .....	0	0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2,801.95	2,801.95
7. Total Disbursements (from Line 31).....	0	0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2,801.95	2,801.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

*ONE BENDON Political Action Committee (FEDERAL)*

Report Covering the Period: From:

04 / 01 / 2008

To:

06 / 30 / 2008

**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).....

0

0

(ii) Unitemized.....

0

0

(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶

0

0

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

0

0

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶

0

0

20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶

0

0

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

0	0
0	0
0	0
0	0
0	0
0	0

28039772063

TO:Pat Ryan COMPANY:

H

Bank of America, N.A.  
P.O. Box 25118  
Tampa, FL 33622-5118

Page 1 of 3  
Statement Period  
06/01/08 through 06/30/08  
E00 P PC 0C 43 0093054  
Enclosures 0  
Account Number



01493 001 SCM999 I 3 0

ONE BEACON INSURANCE CO  
PAC (FEDERAL)  
MS C2-19  
1 BEACON LN MSC C2-19  
CANTON MA 02021-1030

Customer Service Information  
www.bankofamerica.com

28039772064

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Keep track of your account activity automatically and help prevent fees with free Online Banking Alerts. Alerts can help you prevent fees by notifying you when: Your account balance drops below a level that you set, a direct deposit has been posted to your account, or a check you've written has posted. We can deliver your Alerts either by email or text message to your mobile device (check with your service provider for details on specific fees and charges). Visit Online Banking today to learn more.

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TO:Pat Ryan COMPANY:

H

ONE BEACON INSURANCE CO  
PAC (FEDERAL)

Page 2 of 3  
Statement Period  
06/01/08 through 06/30/08  
E00 P PC 0C 43

310

\*\*\*\*\*

**Full Analysis Business Checking**

ONE BEACON INSURANCE CO PAC (FEDERAL)

**Account at a Glance**

Account Number		Statement Beginning Balance	\$2,801.95
Statement Period	06/01/08 through 06/30/08	Amount of Deposits/Credits	\$0.00
Number of Deposits/Credits	0	Amount of Withdrawals/Debits	\$0.00
Number of Withdrawals/Debits	0	Statement Ending Balance	\$2,801.95
Number of Days in Cycle	30	Average Ledger Balance	\$2,801.95
		Service Charge	\$0.00

**Daily Ledger Balances**

Date	Balance (\$)
06/01	2,801.95

28039772065

TO: Pat Ryan COMPANY:

H

0093056

### How To Balance Your Bank of America Account

**FIRST, start with your Account Register/Checkbook:**

1. List your Account Register/Checkbook Balance here \_\_\_\_\_ \$ \_\_\_\_\_
2. Subtract any service charges or other deductions not previously recorded that are listed on this statement \_\_\_\_\_ \$ \_\_\_\_\_
3. Add any credits not previously recorded that are listed on this statement (for example Interest) \_\_\_\_\_ \$ \_\_\_\_\_
4. This is your NEW ACCOUNT REGISTER BALANCE \_\_\_\_\_ \$ \_\_\_\_\_

**NOW, with your Account Statement:**

1. List your Statement Ending Balance here \_\_\_\_\_ \$ \_\_\_\_\_
2. Add any deposits not shown on this statement \_\_\_\_\_ \$ \_\_\_\_\_

**SUBTOTAL** \_\_\_\_\_ \$ \_\_\_\_\_

3. List and total all outstanding checks, ATM, Check Card and other electronic withdrawals

Checks, ATM, Check Card, Electronic Withdrawals		Checks, ATM, Check Card, Electronic Withdrawals		Checks, ATM, Check Card, Electronic Withdrawals	
Date/Check #	Amount	Date/Check #	Amount	Date/Check #	Amount

4. TOTAL OF OUTSTANDING CHECKS, ATM, Check Card and other electronic withdrawals \_\_\_\_\_ \$ \_\_\_\_\_
5. Subtract total outstanding checks, ATM, Check Card and other electronic withdrawals from Subtotal \_\_\_\_\_ \$ \_\_\_\_\_  
This Balance should match your new Account Register Balance \_\_\_\_\_ \$ \_\_\_\_\_

Upon receipt of your statement, differences, if any, should be reported to the bank promptly in writing and in accordance with provisions in your deposit agreement.

#### IMPORTANT INFORMATION FOR BANK DEPOSIT ACCOUNTS

**Change of Address.** Please call us at the telephone number listed on the front of this statement to tell us about a change of address.

**Deposit Agreements.** When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule, which contain the current version of the terms and conditions of your account relationship, may be obtained at our banking centers.

**Electronic Transfers:** In case of errors or questions about your electronic transfers (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

**Reporting Other Problems.** You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or unauthorized transactions within the time periods specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree not to make a claim against us for the problems or unauthorized transactions.

**Direct Deposits.** If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us at the telephone number listed on the front of this statement to find out if the deposit was made as scheduled.

28039772066

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*JRP*  
 PREPARER  
 (3/2005)

7/14/08  
 DATE PREPARED

28039772067