

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **ONE GEICO PLAZA**
Check if different than previously reported. (ACC) **WASHINGTON DC 20076**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00343749 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / 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 / / 2017 through / / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Valdes, Armando, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Valdes, Armando, , ,* [Electronically Filed] Date / / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

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="2017"/>		69733.52
(b) Cash on Hand at Beginning of Reporting Period.....	69079.52	
(c) Total Receipts (from Line 19)	5408.00	20754.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	74487.52	90487.52
7. Total Disbursements (from Line 31).....	5000.00	21000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	69487.52	69487.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

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

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).....	4140.00	10900.00
(ii) Unitemized	1268.00	9854.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5408.00	20754.00
(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)	5408.00	20754.00
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.).....	0.00	0.00
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)).....▶	5408.00	20754.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5408.00	20754.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	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.....	5000.00	21000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	5000.00	21000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	21000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	5408.00	20754.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5408.00	20754.00
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 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Black, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15237 Briar Cliff Manor Way
 City Burtonsville State MD Zip Code 20866-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 19 / 2017**
Transaction ID : SA11AI.29163
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Black, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15237 Briar Cliff Manor Way
 City Burtonsville State MD Zip Code 20866-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.29164
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Black, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15237 Briar Cliff Manor Way
 City Burtonsville State MD Zip Code 20866-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : SA11AI.29165
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 7 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Bryant, Jaime, Gareth, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 S Golfview Drive
 City Plant City State FL Zip Code 33566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29169
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Bryant, Jaime, Gareth, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 S Golfview Drive
 City Plant City State FL Zip Code 33566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29170
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Bryant, Jaime, Gareth, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 S Golfview Drive
 City Plant City State FL Zip Code 33566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29171
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Citron, Irene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 La Cresta Drive
 City San Diego State CA Zip Code 92107-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29173
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Citron, Irene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 La Cresta Drive
 City San Diego State CA Zip Code 92107-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29174
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Citron, Irene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 La Cresta Drive
 City San Diego State CA Zip Code 92107-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29175
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Costa, William, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 Pebble Beach Dr
 City Silver Spring State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29179
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Costa, William, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 Pebble Beach Dr
 City Silver Spring State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29180
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Costa, William, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 Pebble Beach Dr
 City Silver Spring State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29181
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 10 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Hobart, Janice Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 Ramsey St
 City Alexandria State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 19 / 2017**
Transaction ID : SA11AI.29372
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Hobart, Janice Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 Ramsey St
 City Alexandria State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.29373
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Hobart, Janice Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 Ramsey St
 City Alexandria State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : SA11AI.29374
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 11 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Hopkins, Lily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12962 Marcy Ranch Rd
 City Santa Ana State CA Zip Code 92705-2286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.25105
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Hopkins, Lily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12962 Marcy Ranch Rd
 City Santa Ana State CA Zip Code 92705-2286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.25106
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Hopkins, Lily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12962 Marcy Ranch Rd
 City Santa Ana State CA Zip Code 92705-2286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.25107
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 12 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ingall, Seth, M., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2017 Transaction ID : SA11AI.29204		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 60.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 630.00			
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ingall, Seth, M., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017 Transaction ID : SA11AI.29205		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 90.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 720.00			
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ingall, Seth, M., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2017 Transaction ID : SA11AI.29206		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 60.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 780.00			
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 13 OF 32
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Lyons, Donald, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 Riviera Dr.
 Apt 1
 City San Diego State CA Zip Code 92109-6674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29231
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll deduction \$50.00 biweekly

B. Lyons, Donald, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 Riviera Dr.
 Apt 1
 City San Diego State CA Zip Code 92109-6674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29232
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll deduction \$50.00 biweekly

C. Lyons, Donald, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 Riviera Dr.
 Apt 1
 City San Diego State CA Zip Code 92109-6674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29233
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll deduction \$50.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	350.00
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 14 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4450 S Park Ave
 Apt 1201
 City Chevy Chase State MD Zip Code 20815-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29234
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll deduction \$25.00 biweekly

B. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4450 S Park Ave
 Apt 1201
 City Chevy Chase State MD Zip Code 20815-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29235
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll deduction \$25.00 biweekly

C. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4450 S Park Ave
 Apt 1201
 City Chevy Chase State MD Zip Code 20815-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29236
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 15 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Measley, Paul, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2017 Transaction ID : SA11AI.29260		
Mailing Address 861 Timmaron Dr			Amount of Each Receipt this Period 40.00		
City Allen	State TX	Zip Code 75013-5525	Memo Item <input type="checkbox"/> Payroll deduction \$20.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) AVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Measley, Paul, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017 Transaction ID : SA11AI.29261		
Mailing Address 861 Timmaron Dr			Amount of Each Receipt this Period 60.00		
City Allen	State TX	Zip Code 75013-5525	Memo Item <input type="checkbox"/> Payroll deduction \$20.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) AVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Measley, Paul, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2017 Transaction ID : SA11AI.29262		
Mailing Address 861 Timmaron Dr			Amount of Each Receipt this Period 40.00		
City Allen	State TX	Zip Code 75013-5525	Memo Item <input type="checkbox"/> Payroll deduction \$20.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) AVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 520.00			

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Miller, Robert, , ,

Mailing Address 3025 Amherst Avenue

City Dallas	State TX	Zip Code 75225-7808
----------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Regional VP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

Transaction ID : SA11AI.29263

Amount of Each Receipt this Period
60.00

Memo Item
Payroll deduction \$30.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Miller, Robert, , ,

Mailing Address 3025 Amherst Avenue

City Dallas	State TX	Zip Code 75225-7808
----------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Regional VP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.29264

Amount of Each Receipt this Period
90.00

Memo Item
Payroll deduction \$30.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Miller, Robert, , ,

Mailing Address 3025 Amherst Avenue

City Dallas	State TX	Zip Code 75225-7808
----------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Regional VP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

Transaction ID : SA11AI.29265

Amount of Each Receipt this Period
60.00

Memo Item
Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 17 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Nestegard, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13892 Douglas Ranch Dr
 City Pine State CO Zip Code 80470-9545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29272
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$15.00 biweekly

B. Nestegard, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13892 Douglas Ranch Dr
 City Pine State CO Zip Code 80470-9545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29273
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll deduction \$15.00 biweekly

C. Nestegard, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13892 Douglas Ranch Dr
 City Pine State CO Zip Code 80470-9545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29274
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$15.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
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 18 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Nicely, Olza, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5830 Pageland Ln
 City Gainesville State VA Zip Code 20155-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) President-Insurance operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **10 / 19 / 2017**
Transaction ID : SA11AI.29275
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll deduction \$100.00 biweekly

B. Nicely, Olza, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5830 Pageland Ln
 City Gainesville State VA Zip Code 20155-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) President-Insurance operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.29276
 Amount of Each Receipt this Period 300.00
 Memo Item
 Payroll deduction \$100.00 biweekly

C. Nicely, Olza, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5830 Pageland Ln
 City Gainesville State VA Zip Code 20155-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) President-Insurance operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : SA11AI.29277
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll deduction \$100.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. O'Keefe, John, c, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22642 Taylorstown Hunt Ct
 City Ashburn State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : SA11AI.29280
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Parsons, Steve, Clark, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6444 Divine St
 City Mclean State VA Zip Code 22101-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 19 / 2017**
Transaction ID : SA11AI.29284
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll deduction \$20.00 biweekly

C. Parsons, Steve, Clark, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6444 Divine St
 City Mclean State VA Zip Code 22101-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.29285
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Parsons, Steve, Clark, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6444 Divine St
 City Mclean State VA Zip Code 22101-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : SA11AI.29286
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll deduction \$20.00 biweekly

B. Pon, Dina, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Cordell Ave Apt 1112
 City Bethesda State MD Zip Code 20814-3170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 19 / 2017**
Transaction ID : SA11AI.29293
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Pon, Dina, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Cordell Ave Apt 1112
 City Bethesda State MD Zip Code 20814-3170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.29294
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 21 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Pon, Dina, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Cordell Ave
 Apt 1112
 City Bethesda State MD Zip Code 20814-3170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29295
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Proulx, Dana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Avery Court, S.W.
 City Vienna State VA Zip Code 22180-6448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29375
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

C. Quagliato, John, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1736 Navaja Road
 City El Cajon State CA Zip Code 92020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29296
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	65.00
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 22 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Quagliato, John, V, ,		Date of Receipt MM / DD / YYYY 11 / 30 / 2017 Transaction ID : SA11AI.29297
Mailing Address 1736 Navaja Road		Amount of Each Receipt this Period 30.00
City El Cajon	State CA	Zip Code 92020
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll deduction \$10.00 biweekly
Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Quagliato, John, V, ,		Date of Receipt MM / DD / YYYY 12 / 28 / 2017 Transaction ID : SA11AI.29298
Mailing Address 1736 Navaja Road		Amount of Each Receipt this Period 20.00
City El Cajon	State CA	Zip Code 92020
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll deduction \$10.00 biweekly
Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Roberts, William, , ,		Date of Receipt MM / DD / YYYY 10 / 19 / 2017 Transaction ID : SA11AI.29311
Mailing Address 9413 Brooke Dr		Amount of Each Receipt this Period 250.00
City Bethesda	State MD	Zip Code 20817-2109
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll deduction \$125.00 biweekly
Name of Employer (for Individual) GEICO	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2625.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Roberts, William, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9413 Brooke Dr

City Bethesda	State MD	Zip Code 20817-2109
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.29312

Amount of Each Receipt this Period
375.00

Memo Item
Payroll deduction \$125.00 biweekly

B. Roberts, William, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9413 Brooke Dr

City Bethesda	State MD	Zip Code 20817-2109
------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

Transaction ID : SA11AI.29313

Amount of Each Receipt this Period
250.00

Memo Item
Payroll deduction \$125.00 biweekly

C. Shafner, Jonathan, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6108 Wayside Dr

City North Bethesda	State MD	Zip Code 20852-3534
------------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

Transaction ID : SA11AI.29320

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	645.00
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 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Shafner, Jonathan, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6108 Wayside Dr
 City North Bethesda State MD Zip Code 20852-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29321
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Shafner, Jonathan, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6108 Wayside Dr
 City North Bethesda State MD Zip Code 20852-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29322
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Silva, Franklin, Kelly, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 Granite Ridge Dr
 City Lithia State FL Zip Code 33547-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29323
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 25 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Silva, Franklin, Kelly, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 Granite Ridge Dr
 City Lithia State FL Zip Code 33547-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29324
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll deduction \$20.00 biweekly

B. Silva, Franklin, Kelly, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 Granite Ridge Dr
 City Lithia State FL Zip Code 33547-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29325
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll deduction \$20.00 biweekly

C. Singh, Kushwant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21209 Emerald Drive
 City Germantown State MD Zip Code 20876-5931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29329
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	120.00
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 26 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Singh, Kushwant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21209 Emerald Drive
 City Germantown State MD Zip Code 20876-5931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29330
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Singh, Kushwant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21209 Emerald Drive
 City Germantown State MD Zip Code 20876-5931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29331
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Smith, Stephen, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13144 CliftonRoad
 City Silver Spring State MD Zip Code 20904-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29335
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Smith, Stephen, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13144 CliftonRoad
 City Silver Spring State MD Zip Code 20904-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29336
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Smith, Stephen, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13144 CliftonRoad
 City Silver Spring State MD Zip Code 20904-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29337
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Tate, Frank, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 Hassellwood Drive
 City Cary State NC Zip Code 27518-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29341
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 28 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Tate, Frank, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 Hassellwood Drive

City Cary	State NC	Zip Code 27518-3013
--------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.29342

Amount of Each Receipt this Period
30.00

Memo Item
Payroll deduction \$10.00 biweekly

B. Tate, Frank, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 Hassellwood Drive

City Cary	State NC	Zip Code 27518-3013
--------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

Transaction ID : SA11AI.29343

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$10.00 biweekly

C. White, Hollis, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10625 Whiterock Ct

City Laurel	State MD	Zip Code 20723
----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Treasurer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

Transaction ID : SA11AI.29359

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 29 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. White, Hollis, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10625 Whiterock Ct

City Laurel	State MD	Zip Code 20723
----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Treasurer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.29360

Amount of Each Receipt this Period
30.00

Memo Item
Payroll deduction \$10.00 biweekly

B. White, Hollis, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10625 Whiterock Ct

City Laurel	State MD	Zip Code 20723
----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Treasurer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

Transaction ID : SA11AI.29361

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$10.00 biweekly

C. Wingert, Mary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9321 Walking Horse Ct

City Springfield	State VA	Zip Code 22153-1335
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

Transaction ID : SA11AI.29362

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
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 30 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Wingert, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9321 Walking Horse Ct
 City Springfield State VA Zip Code 22153-1335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.29363
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Wingert, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9321 Walking Horse Ct
 City Springfield State VA Zip Code 22153-1335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11AI.29364
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Zinno, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Cobblestone Blvd., Apt.410
 City Fredericksburg State VA Zip Code 22401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2017
Transaction ID : SA11AI.29365
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Zinno, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Cobblestone Blvd., Apt.410
 City Fredericksburg State VA Zip Code 22401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 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
 11 / 30 / 2017
Transaction ID : SA11AI.29366
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Zinno, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Cobblestone Blvd., Apt.410
 City Fredericksburg State VA Zip Code 22401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2017
Transaction ID : SA11AI.29367
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	4140.00

**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"/> 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)

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of Dennis Ross

Mailing Address P.O. Box 7310

City
Lakeland

State
FL

Zip Code
33807

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

Friends of Dennis Ross

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: FL District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2017			

FEC Identification Number

C []

Transaction ID : SB23.29369

Amount of Each Disbursement this Period

[] 2500.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B. McSally for Congress

Mailing Address P.O. Box 19128

City
Tucson

State
AZ

Zip Code
85731

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

McSally for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify)

State: AZ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2017			

FEC Identification Number

C []

Transaction ID : SB23.29371

Amount of Each Disbursement this Period

[] 2500.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

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

[] 5000.00 []

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

[] 5000.00 []