



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		41857.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	38074.52									
(c) Total Receipts (from Line 19) .....	6296.50	12013.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44371.02	53871.02								
7. Total Disbursements (from Line 31) .....	8000.00	17500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36371.02	36371.02								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	2885.00	4015.00
(ii) Unitemized .....	3411.50	7998.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6296.50	12013.50
(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) .....	6296.50	12013.50
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 Transfer (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)) .....	6296.50	12013.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6296.50	12013.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	8000.00	17500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	8000.00	17500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	17500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 20

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 .....	6296.50	12013.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6296.50	12013.50
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 / 20
	<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	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt	
	Mailing Address 1419 Idlewild Blvd		M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.20424
	Fredericksburg	VA	22401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		75.00	
Name of Employer GEICO		Occupation VP		Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		225.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt	
	Mailing Address 1419 Idlewild Blvd		M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.20544
	Fredericksburg	VA	22401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer GEICO		Occupation VP		Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		275.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt	
	Mailing Address 1419 Idlewild Blvd		M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.20650
	Fredericksburg	VA	22401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer GEICO		Occupation VP		Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<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: PAGE 7 / 20

(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**

**A.**

Full Name (Last, First, Middle Initial)  
Paul Lavrey

Mailing Address 3495 Pleasant Grove Drive

City State Zip Code  
**ljamsville MD 21754**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GEICO Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 26 / 2010

**Transaction ID: SA11AI.20553**

Amount of Each Receipt this Period 40.00

Payroll deduction \$20.00 biweekly

**B.**

Full Name (Last, First, Middle Initial)  
Paul Lavrey

Mailing Address 3495 Pleasant Grove Drive

City State Zip Code  
**ljamsville MD 21754**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GEICO Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 23 / 2010

**Transaction ID: SA11AI.20659**

Amount of Each Receipt this Period 40.00

Payroll deduction \$20.00 biweekly

**C.**

Full Name (Last, First, Middle Initial)  
John W McCutcheon

Mailing Address 19218 Tattershall Drive

City State Zip Code  
**Germantown MD 20874**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GEICO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 26 / 2010

**Transaction ID: SA11AI.20565**

Amount of Each Receipt this Period 40.00

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: PAGE 8 / 20

(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**

**A.**

Full Name (Last, First, Middle Initial)  
John W McCutcheon

Mailing Address 19218 Tattershall Drive

City State Zip Code  
Germantown MD 20874

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GEICO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
06 / 23 / 2010

**Transaction ID:** SA11AI.20671

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**B.**

Full Name (Last, First, Middle Initial)  
Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

City State Zip Code  
Tucson AZ 85748

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
05 / 26 / 2010

**Transaction ID:** SA11AI.20567

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**C.**

Full Name (Last, First, Middle Initial)  
Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

City State Zip Code  
Tucson AZ 85748

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
06 / 23 / 2010

**Transaction ID:** SA11AI.20674

Amount of Each Receipt this Period  
40.00

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: PAGE 9 / 20  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Robert Miller

Mailing Address 3025 Amherst Avenue

City State Zip Code  
Dallas TX 75225

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

Name of Employer Occupation  
GEICO Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2010

**Transaction ID:** SA11AI.20569

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**B.**

Full Name (Last, First, Middle Initial)  
Robert Miller

Mailing Address 3025 Amherst Avenue

City State Zip Code  
Dallas TX 75225

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

Name of Employer Occupation  
GEICO Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2010

**Transaction ID:** SA11AI.20675

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**C.**

Full Name (Last, First, Middle Initial)  
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
GEICO President-Insurance operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2010

**Transaction ID:** SA11AI.20456

Amount of Each Receipt this Period  
255.00

Payroll deduction \$85.00 biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **335.00**

**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 10 / 20  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
GEICO President-Insurance operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 1 0

**Transaction ID:** SA11AI.20577

Amount of Each Receipt this Period  
170.00

Payroll deduction \$85.00 biweekly

**B.**

Full Name (Last, First, Middle Initial)  
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
GEICO President-Insurance operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 1 0

**Transaction ID:** SA11AI.20682

Amount of Each Receipt this Period  
170.00

Payroll deduction \$85.00 biweekly

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Pierce

Mailing Address 100 Queen St

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
GEICO VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

**Transaction ID:** SA11AI.20465

Amount of Each Receipt this Period  
120.00

Payroll deduction \$40.00 biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **460.00**

**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 / 20
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt
	Mailing Address 100 Queen St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20584
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 440.00	Payroll deduction \$40.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt
	Mailing Address 100 Queen St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20689
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 520.00	Payroll deduction \$40.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20468
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 225.00	Payroll deduction \$25.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 235.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 / 20
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20587
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 275.00	Payroll deduction \$25.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20692
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 325.00	Payroll deduction \$25.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) John W Quagliato		Date of Receipt
	Mailing Address 1 Hillard Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Poolesville	MD	20837
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20588
Name of Employer GEICO		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 220.00	Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 140.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John W Quagliato		Date of Receipt MM / DD / YYYY 06 / 23 / 2010		
	Mailing Address 1 Hillard Court		Transaction ID: SA11AI.20693		
	City Poolesville	State MD	Zip Code 20837	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly		
	Name of Employer GEICO	Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 260.00					

<b>B.</b>	Full Name (Last, First, Middle Initial) Jess Reed		Date of Receipt MM / DD / YYYY 05 / 26 / 2010		
	Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11AI.20589		
	City Gaithersburg	State MD	Zip Code 20886	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly		
	Name of Employer GEICO	Occupation VP		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 220.00					

<b>C.</b>	Full Name (Last, First, Middle Initial) Jess Reed		Date of Receipt MM / DD / YYYY 06 / 23 / 2010		
	Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11AI.20694		
	City Gaithersburg	State MD	Zip Code 20886	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly		
	Name of Employer GEICO	Occupation VP		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<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 / 20
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) William Roberts	Date of Receipt MM / DD / YYYY 04 / 29 / 2010
	Mailing Address 708 STILLWATER ROAD	<b>Transaction ID:</b> SA11AI.20473
	City State Zip Code GIBSON ISLAND MD 21056	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$75.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Roberts	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 708 STILLWATER ROAD	<b>Transaction ID:</b> SA11AI.20592
	City State Zip Code GIBSON ISLAND MD 21056	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$75.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Roberts	Date of Receipt MM / DD / YYYY 06 / 23 / 2010
	Mailing Address 708 STILLWATER ROAD	<b>Transaction ID:</b> SA11AI.20697
	City State Zip Code GIBSON ISLAND MD 21056	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$75.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	525.00
<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 / 20
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) George Rogers	Date of Receipt MM / DD / YYYY 04 / 29 / 2010
	Mailing Address 5120 Highlands By The Lake Drive	<b>Transaction ID:</b> SA11AI.20474
	City State Zip Code Lakeland FL 33813	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) George Rogers	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 5120 Highlands By The Lake Drive	<b>Transaction ID:</b> SA11AI.20593
	City State Zip Code Lakeland FL 33813	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) George Rogers	Date of Receipt MM / DD / YYYY 06 / 23 / 2010
	Mailing Address 5120 Highlands By The Lake Drive	<b>Transaction ID:</b> SA11AI.20698
	City State Zip Code Lakeland FL 33813	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly
	Name of Employer Occupation GEICO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<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: PAGE 16 / 20  
(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

**A.**

Full Name (Last, First, Middle Initial) Louis Simpson		Date of Receipt MM / DD / YYYY 04 / 29 / 2010
Mailing Address 700 Kings Town Drive		<b>Transaction ID:</b> SA11AI.20482
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Plaza Investment Managers	Occupation President - Capital operations	Payroll deduction \$50.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

**B.**

Full Name (Last, First, Middle Initial) Louis Simpson		Date of Receipt MM / DD / YYYY 05 / 26 / 2010
Mailing Address 700 Kings Town Drive		<b>Transaction ID:</b> SA11AI.20601
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Plaza Investment Managers	Occupation President - Capital operations	Payroll deduction \$50.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

**C.**

Full Name (Last, First, Middle Initial) Louis Simpson		Date of Receipt MM / DD / YYYY 06 / 23 / 2010
Mailing Address 700 Kings Town Drive		<b>Transaction ID:</b> SA11AI.20706
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Plaza Investment Managers	Occupation President - Capital operations	Payroll deduction \$50.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</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 17 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation AVP	<b>Transaction ID:</b> SA11AI.20489
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="75.00"/>
			Payroll deduction \$25.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation AVP	<b>Transaction ID:</b> SA11AI.20608
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="275.00"/>	<input type="text" value="50.00"/>
			Payroll deduction \$25.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation AVP	<b>Transaction ID:</b> SA11AI.20713
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="50.00"/>
			Payroll deduction \$25.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="175.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 20
	(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**

**A.**

Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
Mailing Address 219 Westchester Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Macon GA 31210		<input type="text"/> 0 5 / <input type="text"/> 2 6 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20618
Name of Employer Occupation GEICO VP		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 40.00
Aggregate Year-to-Date ▼ <input type="text"/> 220.00		Payroll deduction \$20.00 biweekly

**B.**

Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
Mailing Address 219 Westchester Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Macon GA 31210		<input type="text"/> 0 6 / <input type="text"/> 2 3 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20723
Name of Employer Occupation GEICO VP		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 40.00
Aggregate Year-to-Date ▼ <input type="text"/> 260.00		Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 80.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 2885.00

**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)

PAGE 19 / 20

<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Dennis Ross for Congress	Transaction ID: SB23.20504 Date of Disbursement 05 / 06 / 2010
	Mailing Address PO Box 7310	Amount of Each Disbursement this Period 1500.00
	City LAKELAND State FL Zip Code 33807	
	Purpose of Disbursement Campaign Contribution Candidate Name Dennis Ross for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) DJOU FOR HAWAII	Transaction ID: SB23.20726 Date of Disbursement 06 / 10 / 2010
	Mailing Address PO BOX 235280	Amount of Each Disbursement this Period 500.00
	City HONOLULU State HI Zip Code 96823	
	Purpose of Disbursement Campaign contribution Candidate Name Djou for Hawaii Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF MARK WARNER	Transaction ID: SB23.20503 Date of Disbursement 05 / 21 / 2010
	Mailing Address 201 NORTH UNION STREET SUITE 300	Amount of Each Disbursement this Period 5000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement Campaign Contribution Candidate Name FRIENDS OF MARK WARNER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00 Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 20

<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)

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Pomeroy for Congress

Mailing Address PO Box 75214

City  
Washington

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Pomeroy for Congress

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: ND District: 01

Transaction ID: SB23.20510

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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