

**FEC  
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

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

C00343749

3. IS THIS REPORT

X

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 Quarterly 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:

X

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

07

20

2004

in the State of

GA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2004

through

06

30

2004

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

Type or Print Name of Treasurer

Michael Campbell

Signature of Treasurer

Electronically Filed by Michael Campbell

Date

07

07

2004

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

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: <sup>M</sup>04 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2004

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>M</sup> <sup>D</sup>		30571.02
(b) Cash on Hand at Beginning of Reporting Period .....	24426.02	
(c) Total Receipts (from Line 19) .....	5275.00	10630.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	29701.02	41201.02
<hr/>		
7. Total Disbursements (from Line 31) .....	8400.00	19900.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21301.02	21301.02
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: <sup>M</sup>04 <sup>-</sup>01 <sup>-</sup>2004 To: <sup>M</sup>06 <sup>-</sup>30 <sup>-</sup>2004

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) .....	1662.00	
(ii) Unitemized .....	3613.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	5275.00	10630.00
(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) .....	5275.00	10630.00
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 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)) .....	5275.00	10630.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5275.00	10630.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	6400.00	19900.00
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 ActMty (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))..	6400.00	19900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6400.00	19900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5275.00	10630.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5275.00	10630.00
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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14

(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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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

Full Name (Last, First, Middle Initial) <b>A. Peter Chin Aieong</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 533 Kersten Street		Transaction ID: SA11A1.12074
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer GEICO	Occupation AVP	Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B. Charles Davies</b>		Date of Receipt M / D / Y 04 / 23 / 2004
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.11798
City Warrenton	State VA	Zip Code 22186
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Charles Davies</b>		Date of Receipt M / D / Y 05 / 20 / 2004
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.11951
City Warrenton	State VA	Zip Code 22186
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>240.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

(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**

Full Name (Last, First, Middle Initial) <b>A. Charles Davies</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.12077
City Warrenton	State VA	Zip Code 22186
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. John Geer</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 2902 Gretna Place		Transaction ID: SA11A1.12080
City Vienna	State VA	Zip Code 22181
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer GEICO	Occupation AVP	Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Miller</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 2820 Amherst Avenue		Transaction ID: SA11A1.12017
City University Park	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer GEICO	Occupation Regional VP	Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8/14  
(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

Full Name (Last, First, Middle Initial) A. <del>Ola</del> Nicely		Date of Receipt M / D / Y 04 / 23 / 2004
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.11818
City State Zip Code Great Falls VA 22066	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 154.00
Name of Employer GEICO	Occupation President-Insurance operations	Payroll deduction \$77.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00	

Full Name (Last, First, Middle Initial) B. <del>Ola</del> Nicely		Date of Receipt M / D / Y 05 / 20 / 2004
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.11868
City State Zip Code Great Falls VA 22066	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 154.00
Name of Employer GEICO	Occupation President-Insurance operations	Payroll deduction \$77.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) C. <del>Ola</del> Nicely		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.12082
City State Zip Code Great Falls VA 22066	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 154.00
Name of Employer GEICO	Occupation President-Insurance operations	Payroll deduction \$77.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>462.00</b>
TOTAL This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 9 / 14

(check only one)  
 11a 13   
 11b 14   
 11c 15   
 12 16   
 17

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

Full Name (Last, First, Middle Initial) <b>A. Jess Reed</b>		Date of Receipt M / D / Y 04 / 23 / 2004
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.11825
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>60.00</b>
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>240.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Jess Reed</b>		Date of Receipt M / D / Y 05 / 20 / 2004
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.11974
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>60.00</b>
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Jess Reed</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.12097
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>60.00</b>
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>360.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 10 / 14

(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 (Last, First, Middle Initial) <b>A. William Roberts</b>		Date of Receipt M / D / Y Y Y Y 04 / 23 / 2004	
Mailing Address 8529 78th Place		Transaction ID: SA11A1.11827	
City Cabin John	State MD	Zip Code 20818	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$50.00 biweekly	
Name of Employer GEICO	Occupation VP	Aggregate Year-to-Date ▼ 400.00	
Receipt For: Primary      General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>B. William Roberts</b>		Date of Receipt M / D / Y Y Y Y 05 / 20 / 2004	
Mailing Address 8529 78th Place		Transaction ID: SA11A1.11976	
City Cabin John	State MD	Zip Code 20818	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$50.00 biweekly	
Name of Employer GEICO	Occupation VP	Aggregate Year-to-Date ▼ 500.00	
Receipt For: Primary      General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>C. William Roberts</b>		Date of Receipt M / D / Y Y Y Y 06 / 16 / 2004	
Mailing Address 8529 79th Place		Transaction ID: SA11A1.12099	
City Cabin John	State MD	Zip Code 20818	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$50.00 biweekly	
Name of Employer GEICO	Occupation VP	Aggregate Year-to-Date ▼ 600.00	
Receipt For: Primary      General Other (specify) ▼			

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 14

(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 (Last, First, Middle Initial) <b>A. Louis Simpson</b>		Date of Receipt M / D / Y 04 / 23 / 2004
Mailing Address P. O. Box 1843		Transaction ID: SA11A1.11834
City Rancho Santa Fe	State CA	Zip Code 92067
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Louis Simpson</b>		Date of Receipt M / D / Y 05 / 20 / 2004
Mailing Address P. O. Box 1843		Transaction ID: SA11A1.11982
City Rancho Santa Fe	State CA	Zip Code 92067
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Louis Simpson</b>		Date of Receipt M / D / Y 06 / 16 / 2004
Mailing Address P. O. Box 1843		Transaction ID: SA11A1.12104
City Rancho Santa Fe	State CA	Zip Code 92067
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1662.00</b>

**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 12 / 14

<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

Full Name (Last, First, Middle Initial)  
**A. Baker for Congress**

Mailing Address P.O. Box 1694

City Baton Rouge State LA Zip Code 70821

Purpose of Disbursement  
campaign contribution

Candidate Name  
Baker for Congress

Office Sought:  House  
Senate  
President

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

State: LA District: 6

Transaction ID: SB23.11685  
Date of Disbursement  
04 / 19 / 2004

Amount of Each Disbursement this Period  
2000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. Calder Clay for US Congress**

Mailing Address P.O. Box 7646

City Macon State GA Zip Code 31208

Purpose of Disbursement  
campaign contribution

Candidate Name  
Calder Clay for US Congress

Office Sought:  House  
Senate  
President

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

State: GA District: 3

Transaction ID: SB23.11684  
Date of Disbursement  
04 / 09 / 2004

Amount of Each Disbursement this Period  
900.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. Ginny Brown-Waite for U.S. Congress**

Mailing Address P.O. Box 178

City Brooksville State FL Zip Code 34601

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Ginny Brown-Waite for U.S. Congress

Office Sought:  House  
Senate  
President

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

State: FL District: 5

Transaction ID: SB23.11646  
Date of Disbursement  
06 / 01 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) ▶

3900.00

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 13 / 14

<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

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

Mailing Address P.O. Box 20209

City Alexandria State VA Zip Code 22320

Purpose of Disbursement  
Campaign Contribution

Candidate Name

Office Sought: House Senate President Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Transaction ID: SB23.1211B  
Date of Disbursement  
06 / 01 / 2004

Amount of Each Disbursement this Period  
1500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. Pennsylvanians for Kanjorski**

Mailing Address 126 South Franklin Street

City Wilkes-Barre State PA Zip Code 18701

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Pennsylvanians for Kanjorski

Office Sought: x House Senate President Disbursement For: 2004 Primary X General Other (specify) ▼

State: PA District 11

Transaction ID: SB23.11855  
Date of Disbursement  
06 / 08 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. Tom Davis for Congress**

Mailing Address PO Box 483

City Dunn Loring State VA Zip Code 22027

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Tom Davis for Congress

Office Sought: x House Senate President Disbursement For: 2004 Primary X General Other (specify) ▼

State: VA District 11

Transaction ID: SB23.11851  
Date of Disbursement  
06 / 01 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

**SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00**

**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 14 / 14

<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

Full Name (Last, First, Middle Initial)

A. TOMPAC

Mailing Address P.O. Box 16488

City Arlington State VA Zip Code 22215

Purpose of Disbursement  
Campaign Contribution

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Transaction ID: SB23.1212D

Date of Disbursement

06 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

8400.00