

# 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  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

ADDRESS (number and street) 2600 South River Road  
 Check if different than previously reported. (ACC)  
Des Plaines IL 60018 3286

2. **FEC IDENTIFICATION NUMBER** C00066472  
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 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:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 12 01 2007 through 12 31 2007

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 June Holmes

Signature of Treasurer Electronically Filed by June Holmes Date 03 20 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		25814.36
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	30669.17									
(c) Total Receipts (from Line 19) .....	27198.51	382897.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57867.68	408711.68								
7. Total Disbursements (from Line 31) .....	10868.75	361712.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	46998.93	46998.93								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	19779.99	217051.51
(i) Itemized (use Schedule A) .....	3917.44	71792.22
(ii) Unitemized .....	23697.43	288843.73
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	3500.00	94000.00
(c) Other Political Committees (such as PACs) .....	27197.43	382843.73
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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.) .....	1.08	53.59
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)) .....	27198.51	382897.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27198.51	382897.32

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	12368.75	325718.75
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.....	-1500.00	35994.00
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))..	10868.75	361712.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10868.75	361712.75

**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) .....	27197.43	382843.73
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27197.43	382843.73
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 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Edward J. Daley		Date of Receipt
	Mailing Address 132 West Main Street		<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
	Freehold	NJ	07728-2049
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 26930313
Name of Employer NJM Insurance Group		Occupation Vice President - Human Resources	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"/>
		<input type="text"/> 300.00	<input type="text"/> 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Bernard M. Flynn		Date of Receipt
	Mailing Address 274 Burning Tree Road		<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
	Delran	NJ	08075-1913
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 26930314
Name of Employer NJM Insurance Group		Occupation Senior Vice President & General Counsel	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"/>
		<input type="text"/> 1200.00	<input type="text"/> 1200.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Paula F. Downey		Date of Receipt
	Mailing Address 10 Wolfe Avenue		<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
	San Rafael	CA	94901-5035
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 26930317
Name of Employer California State Automobile Assn. Inte		Occupation COO	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"/>
		<input type="text"/> 500.00	<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2000.00
<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 7 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Steven B Dunn

Mailing Address 1643 Stoddard Ave.

City State Zip Code  
Thousand Oaks CA 91360-2059

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

Name of Employer Occupation  
California State Automobile Assn. Inte Director of Programing

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2007

**Transaction ID:** 26930336

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
David A. Sampson

Mailing Address 2435 Luckett Ave

City State Zip Code  
Vienna VA 22180-6819

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

Name of Employer Occupation  
PCI President and CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1875.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2007

**Transaction ID:** 26952706

Amount of Each Receipt this Period  
625.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Alex Hageli

Mailing Address 435 S. Cleveland Ave.  
#306

City State Zip Code  
Arlington Heights IL 60005-2164

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

Name of Employer Occupation  
PCI Manager - Personal Lines

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2007

**Transaction ID:** 26952707

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1225.00

**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 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
John Barouski

Mailing Address 581  
Clark Street

City State Zip Code  
Fond Du Lac WI 54936-1029

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

Name of Employer Society Group Occupation  
Society Group VP - Workers Comp

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

**Transaction ID:** 26952708

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Rick Parks

Mailing Address 1941 Frontier Court

City State Zip Code  
West Bend WI 53095-9766

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

Name of Employer Society Group Occupation  
Society Group SVP and COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

**Transaction ID:** 26952709

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Christopher J. Colavita

Mailing Address P. O. Box 60069

City State Zip Code  
City Of Industry CA 91716-0069

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

Name of Employer NJM Insurance Group Occupation  
NJM Insurance Group Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

**Transaction ID:** 26952710

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**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 9 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas A. Meyers	Date of Receipt MM / DD / YYYY 12 / 11 / 2007
	Mailing Address 101 Knox Court	<b>Transaction ID:</b> 26952764
	City State Zip Code Pennington NJ 08534-5167	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NJM Insurance Group Sr. V. P. and CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven Cullen	Date of Receipt MM / DD / YYYY 12 / 11 / 2007
	Mailing Address 11823 Legend Manor Dr	<b>Transaction ID:</b> 26952767
	City State Zip Code Houston TX 77082-3079	Amount of Each Receipt this Period 650.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Market Corporation Group President - COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Connie L. Rank-Smith	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address W4711 Nature Court	<b>Transaction ID:</b> 27012470
	City State Zip Code Sherwood WI 54169-9614	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Jewelers Mutual Insurance Company Vice President HR and Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<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 10 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Patrick W. Breslin

Mailing Address 61 Avalon Road

City Pennington State NJ Zip Code 08534-5183

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

Name of Employer FBL Financial Group Occupation Assistant Secretary Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 17 / 2007

**Transaction ID: 27012602**

Amount of Each Receipt this Period 300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. K. Douglas Briggs

Mailing Address 57 Washington Street

City Quincy State MA Zip Code 02169-5303

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

Name of Employer Quincy Mutual Insurance Group Occupation President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 26 / 2007

**Transaction ID: 27031789**

Amount of Each Receipt this Period 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Phillip E. Love, Jr.

Mailing Address P.O. Box 2124

City West Columbia State SC Zip Code 29171-2124

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

Name of Employer South Carolina Farm Bureau Mutual Insu Occupation Executive Vice President &CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 28 / 2007

**Transaction ID: 27036350**

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **800.00**

**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 11 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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

Mailing Address 2435 Luckett Ave

City Vienna State VA Zip Code 22180-6819

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

Name of Employer PCI Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 28 / 2007  
**Transaction ID: 27036351**  
 Amount of Each Receipt this Period: 625.00

**B.** Full Name (Last, First, Middle Initial)  
Michael J Van Wagner

Mailing Address 562 Cleardale Ave

City Ewing State NJ Zip Code 08618-2541

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

Name of Employer NJM Insurance Group Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 28 / 2007  
**Transaction ID: 27036352**  
 Amount of Each Receipt this Period: 350.00

**C.** Full Name (Last, First, Middle Initial)  
Laura G Rode

Mailing Address 315 N. Lincoln Ave

City Park Ridge State IL Zip Code 60068-3123

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

Name of Employer Markel Corporation Group Occupation Asst VP HR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 31 / 2007  
**Transaction ID: 27094109**  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1225.00

**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 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) David A Egbert		Date of Receipt
	Mailing Address 2516 Northwind PL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Richmond	VA	23233-6617
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27094113
Name of Employer Markel Corporation Group		Occupation Chief Information Officer	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"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Anne G. Waleski		Date of Receipt
	Mailing Address 909 Orchard Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Richmond	VA	23226-3051
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27094114
Name of Employer Markel Corporation Group		Occupation Treasurer	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"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Paul B. Chuchel		Date of Receipt
	Mailing Address 520 Cherokee Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Lake Forest	IL	60045-3157
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27094115
Name of Employer Markel Corporation Group		Occupation Executive	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"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>1000.00</b>
<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 13 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffery W. Lamb

Mailing Address 1 Dogwood Lane

City State Zip Code  
Rumson NJ 07760-1411

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

Name of Employer: Markel Corporation Group  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27094337  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Britton L. Glisson

Mailing Address 15150 Blunts Bridge Road

City State Zip Code  
Doswell VA 23047-2164

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

Name of Employer: Markel Insurance Company  
Occupation: President and Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27094338  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Edward Marcinkevich

Mailing Address 534 Perry Drive

City State Zip Code  
Mount Laurel NJ 08054-3232

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

Name of Employer: Markel Corporation Group  
Occupation: Insurance Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27094340  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Bruce A. Kay		Date of Receipt
	Mailing Address 12916 Fox Meadow Drive		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Richmond	VA	23233-2297
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27094538
Name of Employer Markel Corporation Group		Occupation Vice President	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" value="250.00"/>	<input type="text" value="250.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. G. Don Faison, Jr.		Date of Receipt
	Mailing Address 11445 Barrington Bridge Court		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Richmond	VA	23233-1753
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27095175
Name of Employer Markel Corporation Group		Occupation Vice President	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" value="250.00"/>	<input type="text" value="250.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) David W. Ashley		Date of Receipt
	Mailing Address 4611 E. Mazatzal Drive		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Cave Creek	AZ	85331-2220
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 27095220
Name of Employer Markel Corporation Group		Occupation Executive	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" value="300.00"/>	<input type="text" value="300.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="800.00"/>
<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 15 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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

Mailing Address 10801 Pepperbush CT

City State Zip Code  
Glen Allen VA 23060-6747

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

Name of Employer Occupation  
Markel Corporation Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

**Transaction ID:** 27095319

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alan I. Kirshner

Mailing Address P.O. Box 2009

City State Zip Code  
Glen Allen VA 23058-2009

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

Name of Employer Occupation  
Markel Corporation Group Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

**Transaction ID:** 27095432

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
D Michael Jones

Mailing Address 3812 Nightmuse Way

City State Zip Code  
Glen Allen VA 23059-4800

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

Name of Employer Occupation  
Markel Corporation Group General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

**Transaction ID:** 27095747

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

**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 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Scott Delatorre

Mailing Address 8313 E. Malcomb Dr

City State Zip Code  
Scottsdale AZ 85250-5604

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

Name of Employer: Markel Corporation Group  
Occupation: VP-Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27095877  
Amount of Each Receipt this Period: 300.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas F Smith

Mailing Address 3601 Cannon Ridge CT

City State Zip Code  
Midlothian VA 23113-2021

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

Name of Employer: Markel Corporation Group  
Occupation: VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27096009  
Amount of Each Receipt this Period: 300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Dennis W. Rusch

Mailing Address 14411 Yankeetown Road

City State Zip Code  
Ashland VA 23005-7252

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

Name of Employer: Markel Corporation Group  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 31 / 2007  
Transaction ID: 27096176  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**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 17 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Gregory V. Ostergren		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address Corporate Centre 1949 East Sunshine		<b>Transaction ID:</b> PR1456193318651
	City Springfield	State MO	Zip Code 65899-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 210.00
	Name of Employer American National Property and Casualt	Occupation Chairman, President and CEO	P/R Deduction (\$210.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John C. Lobert		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1798 Brigs Court		<b>Transaction ID:</b> PR1456226918651
	City Lisle	State IL	Zip Code 60532-4558
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 312.51
	Name of Employer PCI	Occupation Senior Vice President	P/R Deduction (\$104.17 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.08		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. James P Brannen		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 3329 Waterberry Circle		<b>Transaction ID:</b> PR1456262918651
	City Waukeee	State IA	Zip Code 50263-8151
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
	Name of Employer FBL Financial Group	Occupation Vice President Finance	P/R Deduction (\$41.67 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>597.51</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:	PAGE 18 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. June T. Holmes		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 409 S. Vine		<b>Transaction ID:</b> PR1456336818651
	City Park Ridge	State IL	Zip Code 60068-4145
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 315.00
	Name of Employer PCI Occupation Treasurer & COO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2520.00

P/R Deduction (\$105.00 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Joanne M. Orfanos		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2104 Butternut Lane		<b>Transaction ID:</b> PR1456395518651
	City Northbrook	State IL	Zip Code 60062-6608
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
	Name of Employer PCI Occupation Senior Vice President Membership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00

P/R Deduction (\$50.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Stuart A. Yakes		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1185 Colony Lane		<b>Transaction ID:</b> PR1456474918651
	City Roselle	State IL	Zip Code 60172-1717
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
	Name of Employer PCI Occupation Vice President ISS	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00

P/R Deduction (\$20.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>525.00</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: PAGE 19 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph Annotti

Mailing Address P.O. Box 44

City State Zip Code  
Glenview IL 60025-0044

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

Name of Employer PCI Occupation  
Senior Vice President Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456534418651

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$50.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Donald Cleasby

Mailing Address 2900 N. Burling St.  
#3S

City State Zip Code  
Chicago IL 60657-5218

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

Name of Employer PCI Occupation  
VP Regional Manager & Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456536918651

Amount of Each Receipt this Period  
75.00

P/R Deduction (\$25.00 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John Eager

Mailing Address 1019 Childs Street

City State Zip Code  
Wheaton IL 60187-4814

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

Name of Employer PCI Occupation  
Senior Director Claims

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456538418651

Amount of Each Receipt this Period  
45.00

P/R Deduction (\$15.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **270.00**

**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 20 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Scott A. Joyner

Mailing Address 57 E. Delaware #2105

City Chicago State IL Zip Code 60611-1476

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

Name of Employer PCI Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2504.00

Date of Receipt  /  /

**Transaction ID:** PR1456541518651

Amount of Each Receipt this Period 319.50

P/R Deduction (\$106.50 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Koziol

Mailing Address 619 N. Florence

City Park Ridge State IL Zip Code 60068-2101

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

Name of Employer PCI Occupation Senior Director & Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  /  /

**Transaction ID:** PR1456542418651

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jon D. Srna

Mailing Address 512 J.C. Rogers

City Wamego State KS Zip Code 66547

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

Name of Employer FBL Financial Group Occupation Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  /  /

**Transaction ID:** PR1456671218651

Amount of Each Receipt this Period 33.28

P/R Deduction (\$29.17 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **382.78**

**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 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. D. Joseph Olson		Date of Receipt
	Mailing Address 4401 Oak Pointe Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Brighton	MI	48116-9790
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Amerisure Companies		Occupation Senior Vice President & Counsel	<b>Transaction ID:</b> PR1456690418651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1740.00	Amount of Each Receipt this Period <input type="text"/> 300.00
			P/R Deduction (\$75.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Steven Wittmuss		Date of Receipt
	Mailing Address 7410 Lambert Place		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Lincoln	NE	68516-5813
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer FBL Financial Group		Occupation Property Claims Vice President	<b>Transaction ID:</b> PR1456694618651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	Amount of Each Receipt this Period <input type="text"/> 55.52
			P/R Deduction (\$50.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Charles G. Severin		Date of Receipt
	Mailing Address 2260 W. Pella Road		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Hallam	NE	68368-2003
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer FBL Financial Group		Occupation Agency Manager	<b>Transaction ID:</b> PR1456695118651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 250.00	Amount of Each Receipt this Period <input type="text"/> 27.76
			P/R Deduction (\$0.00)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>383.28</b>
<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 22 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Susan G. Vincent		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1787 Sheffield		<b>Transaction ID:</b> PR1456707718651
	City Birmingham	State MI	Zip Code 48009-7224
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
	Name of Employer Amerisure Companies	Occupation Vice President & General Counsel	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 940.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. David B. Hostetter		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 37154 Weymouth		<b>Transaction ID:</b> PR1456707918651
	City Livonia	State MI	Zip Code 48152-4096
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
	Name of Employer Amerisure Companies	Occupation Vice President	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Pamela A. Burgess		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2604 Eaton Cross		<b>Transaction ID:</b> PR1456708018651
	City Royal Oak	State MI	Zip Code 48073-3723
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
	Name of Employer Amerisure Companies	Occupation Vice President Internal Audit	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>360.00</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: PAGE 23 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Don A. Smith

Mailing Address 54021 Trent River Drive

City State Zip Code  
Shelby Township MI 48315-1438

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

Name of Employer Occupation  
Amerisure Companies Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 590.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456708218651

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$25.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas E. Hoeg

Mailing Address 17950 Cranbrook Court

City State Zip Code  
Northville MI 48167-4335

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

Name of Employer Occupation  
Amerisure Companies Executive Vice President & COO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1365.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456708418651

Amount of Each Receipt this Period  
220.00

P/R Deduction (\$55.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Roy D Kinnan

Mailing Address 46139 Galway Drive

City State Zip Code  
Novi MI 48374-3972

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

Name of Employer Occupation  
Amerisure Companies Senior Vice President & CFO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456708918651

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **420.00**

**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 24 / 51  
(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
							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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Derick Adams

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Vice President Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456719918651

Amount of Each Receipt this Period 120.00

P/R Deduction (\$30.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Graf

Mailing Address 45000 Drocton

City Novi State MI Zip Code 48375-3802

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

Name of Employer Amerisure Companies Occupation Vice President Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.02

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1456720618651

Amount of Each Receipt this Period 123.08

P/R Deduction (\$30.77 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. James Mangan

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3586

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

Name of Employer Amerisure Companies Occupation Vice President

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

**Transaction ID:** PR1456721118651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **283.08**

**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 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael Dieterle		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 47202 White Pines Drive		<b>Transaction ID:</b> PR1456721818651
	City Novi	State MI	Zip Code 48374-3697
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer Amerisure Companies	Occupation Vice President	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Donald Griffin		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1706 Belcourt Lane		<b>Transaction ID:</b> PR1456723318651
	City Elgin	State IL	Zip Code 60120-7541
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
	Name of Employer PCI	Occupation Vice President Personal Lines	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Mark Richards		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 6909 New Hampshire		<b>Transaction ID:</b> PR1456726218651
	City Crystal Lake	State IL	Zip Code 60012-3148
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
	Name of Employer PCI	Occupation Director HR	P/R Deduction (\$15.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>205.00</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 26 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Stephen W. Broadie	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 480 Florian Drive	<b>Transaction ID:</b> PR1456730418651
	City State Zip Code Des Plaines IL 60016-5716	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Semi-Monthly)
	Name of Employer PCI Occupation PCI Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Ann Marie Weber	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1432 South Fairview	<b>Transaction ID:</b> PR1456730718651
	City State Zip Code Park Ridge IL 60068-5210	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Semi-Monthly)
	Name of Employer PCI Occupation PCI Regional Manager and Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Matthew J. Simon	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 412 Rosario Lane	<b>Transaction ID:</b> PR1456735918651
	City State Zip Code White Lake MI 48386-4404	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>195.00</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: PAGE 27 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Scott Shuck

Mailing Address 27 Northwoods

City Adel State IA Zip Code 50003-9750

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

Name of Employer FBL Financial Group Occupation Vice President - Marketing Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M / D D / Y Y Y Y Y Y  
Transaction ID: PR1456737018651

Amount of Each Receipt this Period 33.28

P/R Deduction (\$0.00)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Brett L Clausen

Mailing Address 12955 E Mercer Lane

City Scottsdale State AZ Zip Code 85259-4416

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

Name of Employer FBL Financial Group Occupation Insurance Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M / D D / Y Y Y Y Y Y  
Transaction ID: PR1456751418651

Amount of Each Receipt this Period 111.04

P/R Deduction (\$0.00)

**C.**

Full Name (Last, First, Middle Initial)  
Julie Petelle

Mailing Address 2600 River Road

City Des Plaines State IL Zip Code 60018-3203

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

Name of Employer PCI Occupation Senior Membership Specialist

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  
Transaction ID: PR1456754518651

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **174.32**

**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 28 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael F. Gilhooly

Mailing Address 12135 Flambeau Drive

City Palos Heights State IL Zip Code 60463-1659

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

Name of Employer PCI Occupation Grassroots, Public Affairs Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt  /  /

**Transaction ID:** PR1456768818651

Amount of Each Receipt this Period 90.00

P/R Deduction (\$30.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Todd B. Ruthruff

Mailing Address 14615 Tudor Chase Drive

City Tampa State FL Zip Code 33626-3338

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

Name of Employer Amerisure Companies Occupation Vice President & Regional Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  /  /

**Transaction ID:** PR1566733118651

Amount of Each Receipt this Period 80.00

P/R Deduction (\$20.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark F. Fox

Mailing Address 29911 Robert

City Livonia State MI Zip Code 48150-3045

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

Name of Employer Amerisure Companies Occupation AVP Special Risk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt  /  /

**Transaction ID:** PR1578285418651

Amount of Each Receipt this Period 80.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**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 29 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lori Lee Tobis

Mailing Address 450 South Vernon

City State Zip Code  
Dearborn MI 48124-1393

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

Name of Employer Occupation  
Amerisure Companies AVP Legal Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1578285718651

Amount of Each Receipt this Period 60.00

P/R Deduction (\$15.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Mr. David P. Galbraith

Mailing Address 580 Michigan Avenue

City State Zip Code  
Marysville MI 48040-1157

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

Name of Employer Occupation  
Amerisure Companies Vice President Loss Control

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

**Transaction ID:** PR1578285818651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rita Nowak

Mailing Address 2244 Innisbrook Court

City State Zip Code  
Aurora IL 60504-3239

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

Name of Employer Occupation  
PCI Assistant Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 382.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1612911818651

Amount of Each Receipt this Period 48.00

P/R Deduction (\$9.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 148.00

**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 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David Anderson		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 670 Schultz Street		<b>Transaction ID:</b> PR1621445118651
	City Lemont	State IL	Zip Code 60439-4076
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
	Name of Employer PCI PCI	Occupation Vice President Worker's Compensation	P/R Deduction (\$0.00 )

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Keith T. Bateman		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 765 Highland Avenue		<b>Transaction ID:</b> PR1621445518651
	City Glen Ellyn	State IL	Zip Code 60137-3853
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer PCI PCI	Occupation Vice President commercial Lines	P/R Deduction (\$10.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Reynold E. Becker		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1047 Falmore Drive		<b>Transaction ID:</b> PR1632197518651
	City Palatine	State IL	Zip Code 60067-7021
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
	Name of Employer PCI PCI	Occupation VP Commercial Lines	P/R Deduction (\$20.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>135.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Ann W. Spragens	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 5510 Chase Avenue	<b>Transaction ID:</b> PR1632493218651
	City Downers Grove State IL Zip Code 60515-4268	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
	Name of Employer PCI: Occupation Senior Vice President & Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Yvonne Macks Hobson	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 8933 Minne Wana Road	<b>Transaction ID:</b> PR1633306018651
	City Clarkston State MI Zip Code 48348-3318	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Bi-Weekly)
	Name of Employer Amerisure Companies: Occupation UW Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 334.23	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Benjamin J. McKay	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1401 South Joyce Street	<b>Transaction ID:</b> PR1695170218651
	City Arlington State VA Zip Code 22202-1874	Amount of Each Receipt this Period 312.51
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$104.17 Semi-Monthly)
	Name of Employer PCI: Occupation Sr. VP Federal Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.08	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>522.51</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 32 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Jean Demas	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2839 St. Anton Court	<b>Transaction ID:</b> PR1716716518651
	City State Zip Code Lisle IL 60532-3429	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer PCI Occupation Assistant Vice President Publishing	Aggregate Year-to-Date 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr David T. Sebastian	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 3546 Widgeon Way	<b>Transaction ID:</b> PR1752164518651
	City State Zip Code Eagan MN 55123-1003	Amount of Each Receipt this Period 33.28
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$40.00 Monthly)
Name of Employer FBL Financial Group Occupation Vice President - Sales	Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Thomas R. Litjen	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 3917 Barcroft Mews Court	<b>Transaction ID:</b> PR1790384218651
	City State Zip Code Falls Church VA 22041-1235	Amount of Each Receipt this Period 312.51
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$104.17 Semi-Monthly)
Name of Employer PCI Occupation VP Federal Government Relations	Aggregate Year-to-Date 2500.08	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>390.79</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 33 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Dale D Chuha		Date of Receipt
	Mailing Address 14780 Hawthorn Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Clive	IA	50325-7765
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer FBL Financial Group		Occupation Insurance Executive	<b>Transaction ID:</b> PR1810342418651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 360.00	Amount of Each Receipt this Period <input type="text"/> 40.00
			P/R Deduction (\$30.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Joe Woods		Date of Receipt
	Mailing Address 2100 Plumbrook		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Austin	TX	78746-6232
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer PCI		Occupation Asst VP and Regional Manager	<b>Transaction ID:</b> PR1812180418651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 360.00	Amount of Each Receipt this Period <input type="text"/> 45.00
			P/R Deduction (\$15.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Marshall E. Wandrei		Date of Receipt
	Mailing Address 10444 Pavillion Court		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Shelby Township	MI	48315-6647
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Amerisure Companies		Occupation Director, Information Technology	<b>Transaction ID:</b> PR1883581518651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	Amount of Each Receipt this Period <input type="text"/> 40.00
			P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>125.00</b>
<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 34 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Todd J. Cicero	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 5240 Kernwood Court	<b>Transaction ID:</b> PR1886330718651
	City State Zip Code Palm Harbor FL 34685-3627	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Customer Service Center Manager	
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) Michael S. Noble	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 140 Fountain Parkway Suite 200	<b>Transaction ID:</b> PR1887205018651
	City State Zip Code Saint Petersburg FL 33716-1285	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Territorial Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Kelly Campbell	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 228 Sugarbin Ct.	<b>Transaction ID:</b> PR1932624218651
	City State Zip Code Longmont CO 80501-9715	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Occupation PCI Regional Manager	
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) .....	<b>130.00</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: PAGE 35 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert W. Herlong

Mailing Address 3429 Emily Place

City Douglasville State SC Zip Code 30135-1984

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

Name of Employer PCI Occupation Vice President and Regional Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1935527918651

Amount of Each Receipt this Period 60.00

P/R Deduction (\$20.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Daniel H. Johnson

Mailing Address 10715 David Taylor Dr. Suite 500

City Charlotte State NC Zip Code 28262-1283

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

Name of Employer Amerisure Companies Occupation Core Service Center Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR1936820218651

Amount of Each Receipt this Period 48.00

P/R Deduction (\$12.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Kay Bauslaugh

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Reinsurance Manager

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

**Transaction ID:** PR2020348318651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 148.00

**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 36 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Tony Burbank

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Corporate Services Manager

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  
**Transaction ID:** PR2020348518651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Rebecca Chapa

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Territorial Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**Transaction ID:** PR2020348618651

Amount of Each Receipt this Period 60.00

P/R Deduction (\$15.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Janet Davenport

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Clerical Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**Transaction ID:** PR2020348918651

Amount of Each Receipt this Period 32.00

P/R Deduction (\$8.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **132.00**

**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 37 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kurt D Gallinger

Mailing Address 26777 Halsted Road

City State Zip Code  
Farmington Hills MI 48331-3577

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

Name of Employer Occupation  
Amerisure Companies Government Relation

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 975.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR2020349218651

Amount of Each Receipt this Period  
200.00

P/R Deduction (\$50.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Bobby D Jones

Mailing Address 26777 Halsted Road

City State Zip Code  
Farmington Hills MI 48331-3577

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

Name of Employer Occupation  
Amerisure Companies Claims Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR2020349318651

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$10.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret LaRuffa

Mailing Address 26777 Halsted Road

City State Zip Code  
Farmington Hills MI 48331-3577

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

Name of Employer Occupation  
Amerisure Companies AVP Human Resources

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR2020349418651

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 340.00

**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 38 / 51  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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

Mailing Address 5221 N O'Connor Blvd #400

City Irving State TX Zip Code 75039

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

Name of Employer Amerisure Companies Occupation Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  /  /

**Transaction ID:** PR2020350118651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Frank G Quinn

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Premium Audit Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  /  /

**Transaction ID:** PR2020350318651

Amount of Each Receipt this Period 32.00

P/R Deduction (\$8.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Janet E Sever

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Claims Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  /  /

**Transaction ID:** PR2020350418651

Amount of Each Receipt this Period 40.00

P/R Deduction (\$10.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 112.00

**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 39 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Mark Sittler		Date of Receipt
	Mailing Address 26777 Halsted Road		<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
	Farmington Hills	MI	48331-3577
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Amerisure Companies		Occupation Property/Liability Supervisor	<b>Transaction ID:</b> PR2020350518651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	Amount of Each Receipt this Period <input type="text"/> 40.00
			P/R Deduction (\$10.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Robert Stahl		Date of Receipt
	Mailing Address 26777 Halsted Road		<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
	Farmington Hills	MI	48331-3577
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Amerisure Companies		Occupation Claims Facility Manager	<b>Transaction ID:</b> PR2020350618651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	Amount of Each Receipt this Period <input type="text"/> 40.00
			P/R Deduction (\$10.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Debra Even		Date of Receipt
	Mailing Address 26777 Halsted		<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
	Farmington Hills	MI	48331-3577
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Amerisure Companies		Occupation Credit Manager	<b>Transaction ID:</b> PR2059592218651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 650.00	Amount of Each Receipt this Period <input type="text"/> 100.00
			P/R Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 180.00
<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 40 / 51		
	<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

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NAME OF COMMITTEE (In Full)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Paul Kangas		Date of Receipt
	Mailing Address 1704 W. Abingdon		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Alexandria	DC	22314-1024
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer PCI		Occupation Director, Federal Government Relations	<b>Transaction ID:</b> PR2127524018651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00	Amount of Each Receipt this Period <input type="text"/> 75.00
			P/R Deduction (\$25.00 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Kate Prible		Date of Receipt
	Mailing Address 3549A Stafford		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Arlington	DC	22206-1823
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer PCI		Occupation Director, Federal Government Affairs	<b>Transaction ID:</b> PR2187694718651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 475.00	Amount of Each Receipt this Period <input type="text"/> 75.00
			P/R Deduction (\$25.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert A Gray		Date of Receipt
	Mailing Address 931 Tulip Lane Lane		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	West Des Moines	IA	50266
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer FBL Financial Group		Occupation Insurance Executive	<b>Transaction ID:</b> PR2194734518651
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 250.00	Amount of Each Receipt this Period <input type="text"/> 27.76
			P/R Deduction (\$0.00)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 177.76
<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 41 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven J Howard		Date of Receipt
	Mailing Address 36594 River Oaks Circle		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Cumming	IA	50061-4415
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR2194734918651
Name of Employer FBL Financial Group		Occupation Insurance Executive	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 ▼ 250.00	27.76
			P/R Deduction (\$0.00 )

<b>B.</b>	Full Name (Last, First, Middle Initial) Joel B Jacobsen		Date of Receipt
	Mailing Address 3279 N Avenue		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Adel	IA	50003-8142
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR2194735118651
Name of Employer FBL Financial Group		Occupation Insurance Executive	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 ▼ 300.00	33.28
			P/R Deduction (\$25.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ronald L Mead		Date of Receipt
	Mailing Address 2972 Country Ridge Lane		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Syracuse	NE	68446-7849
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR2194737918651
Name of Employer FBL Financial Group		Occupation Insurance Executive	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 ▼ 225.00	25.00
			P/R Deduction (\$17.50 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>86.04</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: PAGE 42 / 51  
(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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)  
James M Mincks

Mailing Address 3013 Meadowlane

City State Zip Code  
West Des Moines IA 50265-4139

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR2194738118651

Amount of Each Receipt this Period  
25.00

P/R Deduction (\$25.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Steven M Nelson

Mailing Address 4830 Birch Hollow Drive

City State Zip Code  
Lincoln NE 68516-3382

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR2194738318651

Amount of Each Receipt this Period  
33.28

P/R Deduction (\$0.00)

**C.**

Full Name (Last, First, Middle Initial)  
James W Noyce

Mailing Address 905 48th Street

City State Zip Code  
West Des Moines IA 50265-7107

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y

**Transaction ID:** PR2194739018651

Amount of Each Receipt this Period  
133.28

P/R Deduction (\$125.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **191.56**

**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 43 / 51
	<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Leo M Orth, Jr		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 14614 Wilden Drive		<b>Transaction ID:</b> PR2194743418651
	City Urbandale	State IA	Zip Code 50323-2070
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 66.64
	Name of Employer FBL Financial Group	Occupation Insurance Executive	P/R Deduction (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth G Peters, JR		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 914 NW Campus Ridge Court		<b>Transaction ID:</b> PR2194750418651
	City Ankeny	State IA	Zip Code 50023-4209
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 26.64
	Name of Employer FBL Financial Group	Occupation Insurance Executive	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) JoAnn W Rumelhart		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4004 Grand Avenue #501		<b>Transaction ID:</b> PR2194765918651
	City Des Moines	State IA	Zip Code 50312-2738
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.52
	Name of Employer FBL Financial Group	Occupation Insurance Executive	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>148.80</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: PAGE 44 / 51

(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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial)

Daniel J Vander Ploeg

Mailing Address 4914 Bel aire Road

City State Zip Code  
Des Moines IA 50310-2933

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2194826118651

Amount of Each Receipt this Period

33.28

P/R Deduction (\$0.00 )

**B.**

Full Name (Last, First, Middle Initial)

Jeffery A Lewis

Mailing Address 4718 148th Street

City State Zip Code  
Urbandale IA 50323-2074

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2195102918651

Amount of Each Receipt this Period

33.28

P/R Deduction (\$0.00 )

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

66.56

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

19779.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 51
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

**A.**

Full Name (Last, First, Middle Initial) AON Political Action Committee		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 200 East Randolph Street		<b>Transaction ID:</b> 27036353
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**B.**

Full Name (Last, First, Middle Initial) Assurant Inc. Political Action Committee		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address P. O. Box 3050 501 W. Michigan Street		<b>Transaction ID:</b> 27036358
City Milwaukee	State WI	Zip Code 53201-3050
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3500.00</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)

<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Bill Nelson for U.S. Senate  Mailing Address P.O. Box 10962  City Tallahassee State FL Zip Code 32302  Purpose of Disbursement  Candidate Name Senator Bill Nelson  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26906107 Date of Disbursement 12 / 05 / 2007  Amount of Each Disbursement this Period 2500.00  011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Coleman For Senate 08  Mailing Address 570 Asbury Street Suite 201a  City St Paul State MN Zip Code 55104  Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26905907 Date of Disbursement 12 / 05 / 2007  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
C.	Full Name (Last, First, Middle Initial) House Conservatives Fund  Mailing Address 324 2nd St. SE  City Washington State DC Zip Code 20003  Purpose of Disbursement  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26910354 Date of Disbursement 12 / 05 / 2007  Amount of Each Disbursement this Period 1000.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 47 / 51

<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)  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Friends Of Mark Warner	Transaction ID: 26910359 Date of Disbursement 12 / 05 / 2007
	Mailing Address 201 North Union Suite 350	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. Mark Warner	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joe's Seafood, Steak & Stone Crab	Transaction ID: 26935456 Date of Disbursement 12 / 10 / 2007
	Mailing Address 3500 South Las Vegas Blvd. R05	Amount of Each Disbursement this Period 3368.75
	City Las Vegas State NV Zip Code 89109	
	Purpose of Disbursement In kind contribution to Build America PAC Event 11/02 Las Vegas NV	011 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

In kind contribution to Build America PAC Event 11/02 Las Vegas NV

C.	Full Name (Last, First, Middle Initial) Friends Of Charlie Wilson	Transaction ID: 26935451 Date of Disbursement 12 / 10 / 2007
	Mailing Address P.O. Box 61	Amount of Each Disbursement this Period 1000.00
	City St. Clairsville State OH Zip Code 43950	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Charles Wilson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5368.75
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 51

<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)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Build America PAC <hr/> Mailing Address 153-01 Jamaica Avenue Suite 535 <hr/> City Jamaica State NY Zip Code 11432 <hr/> Purpose of Disbursement In Kind contribution Event 11/02/07 at Joe's Seafood Steak and Stone Crab in Las Vegas, NV Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26935458 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 7
	Amount of Each Disbursement this Period 3368.75
	<b>[MEMO ITEM]</b> In Kind contribution Event 11/02/07 at Joe's Seafood Steak and Stone Crab in Las Vegas, NV
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) DAKPAC <hr/> Mailing Address 607 14th Street NW Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27012407 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Rely On Your Beliefs Fund <hr/> Mailing Address 209 Pennsylvania Avenue, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27027126 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Category/ Type 011

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

2500.00

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

12368.75



**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 49 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Armstrong for Senate <hr/> Mailing Address 670 East Canal Road <hr/> City Hershey State PA Zip Code 17033 <hr/> Purpose of Disbursement Gibson Armstrong, STATE SENATE 13th PA Candidate Name Senator Gibson Armstrong Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26905238 Date of Disbursement 12 / 05 / 2007	Amount of Each Disbursement this Period 1000.00  Gibson Armstrong, STATE SENATE 13th PA
<b>B.</b>	Full Name (Last, First, Middle Initial) Armstrong for Senate <hr/> Mailing Address 670 East Canal Road <hr/> City Hershey State PA Zip Code 17033 <hr/> Purpose of Disbursement Void - Armstrong for Senate Candidate Name Senator Gibson Armstrong Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27147888 Date of Disbursement 12 / 05 / 2007	Amount of Each Disbursement this Period -1000.00  Void - Armstrong for Senate
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends of Governor Fletcher <hr/> Mailing Address P. O. Box 910504 <hr/> City Lexington State KY Zip Code 40591 <hr/> Purpose of Disbursement Void - Friends of Governor Fletcher Candidate Name Gov Ernie Fletcher Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27027518 Date of Disbursement 12 / 26 / 2007	Amount of Each Disbursement this Period -1000.00  Void - Friends of Governor Fletcher

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

-1000.00

**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 50 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Lunsford-Stumbo for Change

Mailing Address 2003 Eastern Parkway

City State Zip Code  
Louisville KY 40204

Purpose of Disbursement  
Void - Lunsford-Stumbo for Change

Candidate Name  
Bruce Lunsford

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 27027519

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

-500.00

Void - Lunsford-Stumbo for Change

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

-500.00

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

-1500.00

Image# 28990629151

Form/Schedule: **F3XA** To amend filing ID FEC-319679, January 31 Year End Report. \$25.00 change in receipts reported.  
Transaction ID:

\*\*\*\*\*