

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2007 NOV 20 AM 9:09

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Government Personnel Mutual Life Insurance Company Political Action Committee

ADDRESS (number and street)

2211 N. E. Loop 410



Check if different than previously reported. (ACC)

San Antonio

TX

78217

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00236588

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on

11 / 01 / 2007

in the State of

TX

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

11 / 01 / 2007

in the State of

TX

5. Covering Period

10 / 01 / 2007

through

10 / 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 **Pamela A Hutchins**

Signature of Treasurer

*Yolanda R. Rivas*  
Yolanda R. Rivas, Ass't. Treasurer

Date

11 / 19 / 2007

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

Office Use Only

**FEC FORM 3X**  
Rev. 12/2004

270395564128

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Government Personnel Mutual Life Insurance Company Political Action Committee**

Report Covering the Period: From: **10 / 01 / 2007** To: **10 / 31 / 2007**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2007</b>		1,125.15
(b) Cash on Hand at Beginning of Reporting Period.....	3,452.15	
(c) Total Receipts (from Line 19) .....	350.00	3,100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3,802.15	4,225.15
7. Total Disbursements (from Line 31).....	17.00	440.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3,785.15	3,785.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	—	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	—	

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

27039564129

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Government Personnel Mutual Life Insurance Company Political Action Committee**

Report Covering the Period: From: 10/01/2007 To: 10/31/2007

27039564130

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	350.00	3100.00
(ii) Unitemized.....	—	—
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	350.00	3100.00
(b) Political Party Committees.....	—	—
(c) Other Political Committees (such as PACs).....	—	—
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	350.00	3100.00
12. Transfers From Affiliated/Other Party Committees.....	—	—
13. All Loans Received.....	—	—
14. Loan Repayments Received.....	—	—
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	—	—
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	—	—
17. Other Federal Receipts (Dividends, Interest, etc.).....	—	—
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	—	—
(b) Levin Funds (from Schedule H5).....	—	—
(c) Total Transfers (add 18(a) and 18(b))..	—	—
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	350.00	3100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	350.00	3100.00



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	350.00	3100.00
34. Total Contribution Refunds (from Line 28(d)) .....	—	—
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	350.00	3100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17.00	170.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	—	—
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17.00	170.00

27039564132

**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 1 OF 3	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

NAME OF COMMITTEE (In Full)  
**Government Personnel Mutual Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Hennessey III, Peter J.</b>		Date of Receipt <b>10 / 04 / 2007</b>
Mailing Address <b>65 Bristol Green</b>		Amount of Each Receipt this Period <b>50.00</b>
City <b>San Antonio, Texas</b>	State Zip Code <b>78209</b>	
FEC ID number of contributing federal political committee. <b>C 00236588</b>		Aggregate Year-to-Date <b>500.00</b>
Name of Employer <b>Government Personnel Mutual Life Insurance Company</b>	Occupation <b>Chairman of the Board</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Draper, Robert R.</b>		Date of Receipt <b>10 / 04 / 2007</b>
Mailing Address <b>11823 Tarragon Cove</b>		Amount of Each Receipt this Period <b>50.00</b>
City <b>San Antonio, Texas</b>	State Zip Code <b>78213</b>	
FEC ID number of contributing federal political committee. <b>C 00236588</b>		Aggregate Year-to-Date <b>500.00</b>
Name of Employer <b>Government Personnel Mutual Life Insurance Company</b>	Occupation <b>Vice President</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ferguson, C. Alan</b>		Date of Receipt <b>10 / 04 / 2007</b>
Mailing Address <b>8601 Barn Swallow</b>		Amount of Each Receipt this Period <b>50.00</b>
City <b>San Antonio, Texas</b>	State Zip Code <b>78255</b>	
FEC ID number of contributing federal political committee. <b>C 00236588</b>		Aggregate Year-to-Date <b>500.00</b>
Name of Employer <b>Government Personnel Mutual Life Insurance Company</b>	Occupation <b>Attorney</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<b>150.00</b>
TOTAL This Period (last page this line number only).....▶	

27039564133

**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 2 OF 3		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Government Personnel Mutual Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Hennessey IV, Peter J.**

Mailing Address  
**135 E. Oakview**

City State Zip Code  
**San Antonio, Texas 78209**

FEC ID number of contributing federal political committee. **C 00236588**

Name of Employer **Government Personnel Mutual Life Insurance Company** Occupation **Sr. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,000.00**

Date of Receipt  
**10 ' 04 ' 2007**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Hoffman, William M.**

Mailing Address  
**411 Oak Leaf**

City State Zip Code  
**San Antonio, Texas 78209**

FEC ID number of contributing federal political committee. **C 00236588**

Name of Employer **Government Personnel Mutual Life Insurance Company** Occupation **Sr. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 ' 04 ' 2007**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Hutchins, Pamela A**

Mailing Address  
**8515 Chesham**

City State Zip Code  
**San Antonio, Texas 78254**

FEC ID number of contributing federal political committee. **C 00236588**

Name of Employer **Government Personnel Mutual Life Insurance Company** Occupation **Sr. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 ' 04 ' 2007**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**

27039564134

**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 3 OF 3		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)

**Government Personnel Mutual Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mendoza, Maria de Lourdes**

Mailing Address

**124 Grand Oak**

City

**San Antonio, Texas 78232**

State

Zip Code

FEC ID number of contributing federal political committee.

**C 00236588**

Name of Employer **Government Personnel Mutual Life Insurance Company**

Occupation

**Vice President & Treasurer**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**10 / 04 / 2007**

Amount of Each Receipt this Period

**500.00**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

**350.00**

27039564135

**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 1 OF 1	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
**Government Personnel Mutual Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Frost National Bank</b>		Date of Disbursement <b>10 / 31 / 2007</b>
Mailing Address <b>P. O. Box 1600</b>		Amount of Each Disbursement this Period <b>17.00</b>
City <b>San Antonio, Texas</b>	State <b>Texas</b>	
Zip Code <b>78296</b>		
Purpose of Disbursement <b>Bank Service Charge</b>		Category/ Type <b>001</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <b>Bank Service Charge</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	
TOTAL This Period (last page this line number only).....	<b>17.00</b>

27039564136

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date  
*11/19/07*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*EW*  
 PREPARER

*11/29/07*  
 DATE PREPARED

27039564137