

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 T. Holmes

Signature of Treasurer June T. Holmes [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="171710.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="177047.41"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="69079.92"/>	<input type="text" value="213517.27"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="246127.33"/>	<input type="text" value="385227.58"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30500.96"/>	<input type="text" value="169601.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="215626.37"/>	<input type="text" value="215626.37"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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 (PCIPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	57973.85	150809.66
(ii) Unitemized	5455.11	32929.80
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	63428.96	183739.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	26250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	68428.96	209989.46
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).....	650.96	3527.81
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	69079.92	213517.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	69079.92	213517.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	650.96	3501.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	650.96	3501.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	150500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	7350.00	15600.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30500.96	169601.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30500.96	169601.21

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)	68428.96	209989.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68428.96	209989.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	650.96	3501.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	650.96	3527.81
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-26.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (PCIPAC)

A. Gerard Albanese
 Full Name (Last, First, Middle Initial)
 Mailing Address 4521 Highwoods Pkwy
 City State Zip Code
 Glen Allen VA 23060-6148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Markel Corporation Group Executive Vice President and Chief Und
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2014
Transaction ID : 05D6D5650880405AA8AD
 Amount of Each Receipt this Period
 1500.00

B. Donald Applegate
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Royal Rd
 Ste 100
 City State Zip Code
 Flemington NJ 08822-1621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Farmers Insurance Company of Flemingto Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : 92DE6A94E07EA518751
 Amount of Each Receipt this Period
 240.00

C. Kristina Baldwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 90 S Swan St
 Ste 400
 City State Zip Code
 Albany NY 12210-2105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PCI Vice President, State Government Relat
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 20140415132557-1
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	1770.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Kristina Baldwin		Date of Receipt
Mailing Address 90 S Swan St Ste 400		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Albany	State NY	Zip Code 12210-2105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-1
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Vice President, State Government Relat		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="240.00"/>		

Full Name (Last, First, Middle Initial) B. Kevin C. Banwart		Date of Receipt
Mailing Address 808 Highway 18 W		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City Algona	State IA	Zip Code 50511-7234
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A769A1B56D8A8FBB8CD
Name of Employer Pharmacists Mutual Insurance Company		Amount of Each Receipt this Period
Occupation Treasurer, Chief Financial Officer, SV		<input type="text" value="480.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="480.00"/>		

Full Name (Last, First, Middle Initial) C. Gerry Benusa		Date of Receipt
Mailing Address 6000 American Pkwy		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Madison	State WI	Zip Code 53777-0001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 22DCBC2FC3EA66F9568
Name of Employer American Family Mutual Insurance Compa		Amount of Each Receipt this Period
Occupation Executive Vice President		<input type="text" value="550.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="550.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1060.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Paul C. Blume		Date of Receipt
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140415132557-3
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Senior Vice President, State Governmen		<input type="text" value="82.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="492.00"/>	

Full Name (Last, First, Middle Initial) B. Paul C. Blume		Date of Receipt
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-3
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Senior Vice President, State Governmen		<input type="text" value="82.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="492.00"/>	

Full Name (Last, First, Middle Initial) C. Kenton Brine		Date of Receipt
Mailing Address 1500 Water St SW Apt 2		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Olympia	State WA	Zip Code 98501-2295
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140415132557-5
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Assistant Vice President, State Govern		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="214.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 OF 64
<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Kenton Brine		Date of Receipt
Mailing Address 1500 Water St SW Apt 2		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Olympia	State WA	Zip Code 98501-2295
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-5
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Assistant Vice President, State Govern		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) B. Joel Brown		Date of Receipt
Mailing Address 518 E Broad St		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City Columbus	State OH	Zip Code 43215-3901
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : F59670B7E8D6B5E8AF5
Name of Employer State Auto Insurance Companies		Amount of Each Receipt this Period
Occupation Vice President - Standard Lines		<input type="text" value="250.00"/>
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"/>		

Full Name (Last, First, Middle Initial) C. Pamela A. Burgess		Date of Receipt
Mailing Address 2604 Eton Cross Rd		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Royal Oak	State MI	Zip Code 48073-3723
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140417172914-3
Name of Employer Amerisure Companies		Amount of Each Receipt this Period
Occupation Vice President Strategic Process Desig		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="225.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
TOTAL 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 10 OF 64
	<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 (PCIPAC)

A. Alita Burke
Full Name (Last, First, Middle Initial)
Mailing Address 518 E Broad St
City Columbus State OH Zip Code 43215-3901
FEC ID number of contributing federal political committee. **C**
Name of Employer State Auto Insurance Companies Occupation Assistant Vice President / Dean, State
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt 04 / 08 / 2014
Transaction ID : 175E0C96A3B04191A2BA
Amount of Each Receipt this Period 240.00

B. Kelly Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 1535 Grant St Ste 304
City Denver State CO Zip Code 80203-1843
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 04 / 14 / 2014
Transaction ID : 20140415132557-9
Amount of Each Receipt this Period 50.00

c. Kelly Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 1535 Grant St Ste 304
City Denver State CO Zip Code 80203-1843
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 04 / 28 / 2014
Transaction ID : 20140428155815-9
Amount of Each Receipt this Period 50.00

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: (check only one)	PAGE 11 OF 64
	<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 (PCIPAC)

A. Richard P. Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 535 Springfield Ave
Ste 200

City Summit State NJ Zip Code 07901-2631

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

Name of Employer: Markel Corporation Group
Occupation: SVP and Underwriter - Casualty Reinsur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 04 / 24 / 2014
Transaction ID : 9F968ABFB90301B8E12

Amount of Each Receipt this Period: 240.00

B. Terrence W. Cavanaugh
Full Name (Last, First, Middle Initial)

Mailing Address 100 Erie Insurance PI

City Erie State PA Zip Code 16530-9000

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

Name of Employer: Erie Insurance Group
Occupation: President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 21 / 2014
Transaction ID : 5BFB85306B69D9827CB

Amount of Each Receipt this Period: 5000.00

C. David J. Cercone
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

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

Name of Employer: PCI
Occupation: Executive Vice President & General Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 14 / 2014
Transaction ID : 20140415132557-10

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional).....▶	5290.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 64
<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 (PCIPAC)

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

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

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

Name of Employer PCI Occupation Executive Vice President & General Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 28 / 2014
Transaction ID : 20140428155815-10

Amount of Each Receipt this Period
50.00

B. Gerald K. Chiddick
Full Name (Last, First, Middle Initial)

Mailing Address 6743 Fleming Creek Dr

City Superior Township State MI Zip Code 48198-8702

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

Name of Employer Amerisure Companies Occupation Vice President of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
04 / 17 / 2014
Transaction ID : 20140417172914-5

Amount of Each Receipt this Period
20.00

C. Randi Cigelnik
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

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

Name of Employer PCI Occupation Senior Vice President, Corporate Secre

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 14 / 2014
Transaction ID : 20140415132557-11

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

A. Randi Cigelnik
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Senior Vice President, Corporate Secre
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : 20140428155815-11
 Amount of Each Receipt this Period
 50.00

B. Kevin M. Clement
 Full Name (Last, First, Middle Initial)
 Mailing Address 2139 Cliffside Dr
 City Wixom State MI Zip Code 48393-1277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation Director, Enterprise Risk Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : 20140408145240-7
 Amount of Each Receipt this Period
 50.00

C. Kevin M. Clement
 Full Name (Last, First, Middle Initial)
 Mailing Address 2139 Cliffside Dr
 City Wixom State MI Zip Code 48393-1277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation Director, Enterprise Risk Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 20140417172914-7
 Amount of Each Receipt this Period
 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (PCIPAC)

A. Barbara J. Cristea
 Full Name (Last, First, Middle Initial)
 Mailing Address 7879 Rutherford Ct
 City Canton State MI Zip Code 48187-1244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation Insurance Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 04 / 17 / 2014
Transaction ID : 20140417172914-9
 Amount of Each Receipt this Period
 25.00

B. Mike Crowley
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 Cox Rd
 City Glen Allen State VA Zip Code 23060-6753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Markel Corporation Group Occupation President and Co-Chief Operating Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 04 / 04 / 2014
Transaction ID : E00D72C4AD45A3F4454
 Amount of Each Receipt this Period
 600.00

C. David C. Cruikshank
 Full Name (Last, First, Middle Initial)
 Mailing Address 4730 E State Road 64
 City Bradenton State FL Zip Code 34208-9058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IAT Insurance Group Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 04 / 15 / 2014
Transaction ID : A2C704B818B14C15BC5D
 Amount of Each Receipt this Period
 700.00

SUBTOTAL of Receipts This Page (optional).....▶	1325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. William R. Dahlman
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

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

Name of Employer California Casualty Group Occupation Board of Directors

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2014
Transaction ID : 54444E3414F1976636C

Amount of Each Receipt this Period
240.00

B. Michael M. Dieterle
Full Name (Last, First, Middle Initial)

Mailing Address 47202 White Pines Dr

City Novi State MI Zip Code 48374-3697

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

Name of Employer Amerisure Companies Occupation Vice President, Field Marketing & Unde

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2014
Transaction ID : 20140408145240-11

Amount of Each Receipt this Period
50.00

C. Michael M. Dieterle
Full Name (Last, First, Middle Initial)

Mailing Address 47202 White Pines Dr

City Novi State MI Zip Code 48374-3697

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

Name of Employer Amerisure Companies Occupation Vice President, Field Marketing & Unde

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : 20140417172914-11

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 16 OF 64
	<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 (PCIPAC)

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

Mailing Address 8500 Normandale Lake Blvd
Ste 1400

City Bloomington State MN Zip Code 55437-3826

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

Name of Employer State Auto Insurance Companies Occupation Vice President - Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
04 / 25 / 2014
Transaction ID : **B64E16C694CB40AEBDAF**

Amount of Each Receipt this Period
480.00

B. Vincent T. Donnelly
Full Name (Last, First, Middle Initial)

Mailing Address 174 Meadow View Ln

City Lansdale State PA Zip Code 19446-5931

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

Name of Employer PMA Insurance Group Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
04 / 14 / 2014
Transaction ID : **20140414155606-3**

Amount of Each Receipt this Period
50.00

C. Bridget Driggs
Full Name (Last, First, Middle Initial)

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

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

Name of Employer PCI Occupation Director, Political Engagement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.10

Date of Receipt
04 / 28 / 2014
Transaction ID : **20140428155815-13**

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00

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 OF 64
	<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 (PCIPAC)

A. Bridget Driggs
Full Name (Last, First, Middle Initial)

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

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

Name of Employer PCI Occupation Director, Political Engagement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.10

Date of Receipt
04 / 28 / 2014
Transaction ID : 5B194F82A5F342C18584

Amount of Each Receipt this Period
0.10

B. Dan Ekstein
Full Name (Last, First, Middle Initial)

Mailing Address 5702 Wyngate Dr

City Bethesda State MD Zip Code 20817-2555

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

Name of Employer Sagac Public Affairs LLC Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 25 / 2014
Transaction ID : D8D917751A7542D6AC32

Amount of Each Receipt this Period
250.00

C. Steven E. English
Full Name (Last, First, Middle Initial)

Mailing Address 6608 Carinlough Pl

City Dublin State OH Zip Code 43016-6005

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

Name of Employer State Auto Insurance Companies Occupation Senior Vice President and Chief Financ

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 14 / 2014
Transaction ID : 852B52DDD42D8C586B4

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 64
	<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 (PCIPAC)

A. Sally A. Estvanic
Full Name (Last, First, Middle Initial)
Mailing Address 1 Park Cir
City Westfield Center State OH Zip Code 44251-9700
FEC ID number of contributing federal political committee. **C**
Name of Employer Westfield Group Occupation Group Government Relations Leader
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 08 / 2014
Transaction ID : 38BA388EA40E4829A700
Amount of Each Receipt this Period 240.00

B. Lee C. Fanshaw
Full Name (Last, First, Middle Initial)
Mailing Address 6000 American Pkwy
City Madison State WI Zip Code 53777-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer American Family Mutual Insurance Compa Occupation Federal Government Affairs Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 21 / 2014
Transaction ID : 768E68B86169ED36371
Amount of Each Receipt this Period 240.00

C. Andrew Furgatch
Full Name (Last, First, Middle Initial)
Mailing Address 11755 Wilshire Blvd Ste 1850
City Los Angeles State CA Zip Code 90025-1569
FEC ID number of contributing federal political committee. **C**
Name of Employer Magna Carta Companies Occupation Chairman and Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 04 / 02 / 2014
Transaction ID : A52251A8752040D490D3
Amount of Each Receipt this Period 3600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4080.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. George Furlong

Mailing Address 100 State Auto Blvd

City Goodlettsville State TN Zip Code 37072-2172

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

Name of Employer State Auto Insurance Companies Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : 7C04F10565A7B7F4E4F

Amount of Each Receipt this Period
 240.00

Full Name (Last, First, Middle Initial)
B. Daniel Gamble

Mailing Address 4521 Highwoods Pkwy

City Glen Allen State VA Zip Code 23060-6148

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

Name of Employer Markel Corporation Group Occupation Underwriter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : BC8AE10BAB5F0ABF88F

Amount of Each Receipt this Period
 240.00

Full Name (Last, First, Middle Initial)
C. Leonard S. Genders

Mailing Address 518 E Broad St

City Columbus State OH Zip Code 43215-3901

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

Name of Employer State Auto Insurance Companies Occupation Assistant Vice President / IT Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : B3B9261229FBC8CC21A

Amount of Each Receipt this Period
 245.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 64
	<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 (PCIPAC)

A. Michael F. Gerik
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 23650

City Waco State TX Zip Code 76702-3650

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

Name of Employer Texas Farm Bureau Group Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 04 / 01 / 2014
Transaction ID : 20140401180017-2

Amount of Each Receipt this Period 150.00

B. Michael F. Gerik
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 23650

City Waco State TX Zip Code 76702-3650

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

Name of Employer Texas Farm Bureau Group Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 04 / 21 / 2014
Transaction ID : 20140421150227-2

Amount of Each Receipt this Period 150.00

C. Thomas P. Goodrich
Full Name (Last, First, Middle Initial)

Mailing Address 808 Highway 18 W

City Algona State IA Zip Code 50511-7234

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

Name of Employer Pharmacists Mutual Insurance Company Occupation Senior Vice President Marketing and Co

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 10 / 2014
Transaction ID : 92A6BB7F9AC6660913A

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

A. Daniel J. Graf
 Full Name (Last, First, Middle Initial)
 Mailing Address 45000 Drocton Ct
 City State Zip Code
 Novi MI 48375-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Amerisure Companies Chief Investment Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : 20140408145240-20
 Amount of Each Receipt this Period
 250.00

B. Daniel J. Graf
 Full Name (Last, First, Middle Initial)
 Mailing Address 45000 Drocton Ct
 City State Zip Code
 Novi MI 48375-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Amerisure Companies Chief Investment Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 20140417172914-20
 Amount of Each Receipt this Period
 250.00

c. Michael T. Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 N I 10 Service Rd W
 City State Zip Code
 Metairie LA 70002-7029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Gray Insurance Company President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 2FA17DD6AF64C148BE6
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	5050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Steven M. Hartzler
Full Name (Last, First, Middle Initial)

Mailing Address 10398 E Acacia Dr

City State Zip Code
Scottsdale AZ 85255-8668

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

Name of Employer Occupation
Amerisure Companies Core Service Center Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2014
Transaction ID : 20140408145240-23

Amount of Each Receipt this Period
25.00

B. Steven M. Hartzler
Full Name (Last, First, Middle Initial)

Mailing Address 10398 E Acacia Dr

City State Zip Code
Scottsdale AZ 85255-8668

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

Name of Employer Occupation
Amerisure Companies Core Service Center Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : 20140417172914-23

Amount of Each Receipt this Period
25.00

C. Ronald J. Herrig
Full Name (Last, First, Middle Initial)

Mailing Address 10 Parkway N

City State Zip Code
Deerfield IL 60015-2526

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

Name of Employer Occupation
Markel Corporation Group Vice President and Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : 62B7F89CC087EA5B79E

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Thomas E. Hoeg
 Full Name (Last, First, Middle Initial)
 Mailing Address 17950 Cranbrook Ct
 City Northville State MI Zip Code 48168-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation President and Chief Executive Officer,
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 20140417172914-26
 Amount of Each Receipt this Period
 25.00

B. Rick L. Holbein
 Full Name (Last, First, Middle Initial)
 Mailing Address 518 E Broad St
 City Columbus State OH Zip Code 43215-3901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Auto Insurance Companies Occupation Vice President, Director Personal Insu
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 925E5CAC6DA1B09795C
 Amount of Each Receipt this Period
 600.00

C. June Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Chief Operating Officer and Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 20140415132557-26
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. June Holmes		Date of Receipt
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-26
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Chief Operating Officer and Treasurer		<input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) B. Robert C. Ingram III		Date of Receipt
Mailing Address 100 Erie Insurance PI		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Erie	State PA	Zip Code 16530-9000
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 86B092457B3EEAAC80B
Name of Employer Erie Insurance Group		Amount of Each Receipt this Period
Occupation Executive Vice President and Chief Inf		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Susan J. Insley		Date of Receipt
Mailing Address 1 Park Cir		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Westfield Center	State OH	Zip Code 44251-9700
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3A62FAAE0A0717358E7
Name of Employer Westfield Group		Amount of Each Receipt this Period
Occupation Director		<input type="text" value="600.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Micaela Isler		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20001-1508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20140415132557-27
Name of Employer	Occupation	Amount of Each Receipt this Period
PCI	Assistant Vice President, State Govern	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Micaela Isler		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20001-1508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20140428155815-27
Name of Employer	Occupation	Amount of Each Receipt this Period
PCI	Assistant Vice President, State Govern	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. Greg S. Jacobi		Date of Receipt
Mailing Address 1 Geico Plz		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20046-0004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : C1250C11E117418CACBF
Name of Employer	Occupation	Amount of Each Receipt this Period
GEICO	Underwriting Assistant Vice President	<input type="text" value="240.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="340.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

A. Scott A. Joyner
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Vice President, Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 20140415132557-28
 Amount of Each Receipt this Period
 55.00

B. Scott A. Joyner
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Vice President, Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : 20140428155815-28
 Amount of Each Receipt this Period
 55.00

C. James R. Kauffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Alameda De Las Pulgas
 Ste B-5
 City San Mateo State CA Zip Code 94403-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Casualty Group Occupation Senior Vice President - Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2014
Transaction ID : 34A6A8E8742FB3E3F8A
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	360.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (PCIPAC)

A. Bruce A. Kay
 Full Name (Last, First, Middle Initial)
 Mailing Address 4521 Highwoods Pkwy
 City State Zip Code
 Glen Allen VA 23060-6148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Markel Corporation Group Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 095693A179FA11A4DAE
 Amount of Each Receipt this Period
 500.00

B. John F. Kearns
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Erie Insurance PI
 City State Zip Code
 Erie PA 16530-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Executive Vice President, Sales and Ma
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2014
Transaction ID : 0808F55D1BE7073334F
 Amount of Each Receipt this Period
 1000.00

C. Kimberley A. Kemper
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Painted Horse
 City State Zip Code
 Waco TX 76712-8851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Farm Bureau Group Insurance Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2014
Transaction ID : 20140401180017-3
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Kimberley A. Kemper

Mailing Address 100 Painted Horse

City Waco State TX Zip Code 76712-8851

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

Name of Employer Texas Farm Bureau Group Occupation Insurance Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : 20140421150227-3

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Barbara Kerr

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

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

Name of Employer California Casualty Group Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2014

Transaction ID : F42C8A004E04430AAFF0

Amount of Each Receipt this Period
250.00

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

Mailing Address 46139 Galway Dr

City Novi State MI Zip Code 48374-3972

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

Name of Employer Amerisure Companies Occupation Chief Financial Officer & Treasurer, A

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
04 / 17 / 2014

Transaction ID : 20140417172914-31

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **325.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 64
	<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 (PCIPAC)

A. Alan I. Kirshner
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2010

City State Zip Code
Glen Allen VA 23058-2010

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

Name of Employer Occupation
Markel Corporation Group Chairman and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2014
Transaction ID : 674299A4286DC557872

Amount of Each Receipt this Period
1000.00

B. Bradley J. Kiscaden
Full Name (Last, First, Middle Initial)

Mailing Address 4521 Highwoods Pkwy

City State Zip Code
Glen Allen VA 23060-6148

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

Name of Employer Occupation
Markel Corporation Group Chief Corporate Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2014
Transaction ID : A69F71FBE5D148FE438

Amount of Each Receipt this Period
240.00

C. Tom Litjen
Full Name (Last, First, Middle Initial)

Mailing Address 444 N Capitol St NW
Ste 801

City State Zip Code
Washington DC 20001-1508

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

Name of Employer Occupation
PCI Vice President, Federal Government Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.36

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2014
Transaction ID : 20140415132557-32

Amount of Each Receipt this Period
104.17

SUBTOTAL of Receipts This Page (optional).....	1344.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Tom Litjen		Date of Receipt M M / D D / Y Y Y Y Y 04 / 28 / 2014 Transaction ID : 20140428155815-32
Mailing Address 444 N Capitol St NW Ste 801		Amount of Each Receipt this Period 104.17
City Washington	State DC Zip Code 20001-1508	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer PCI	Occupation Vice President, Federal Government Rel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Deirdre Manna		Date of Receipt M M / D D / Y Y Y Y Y 04 / 14 / 2014 Transaction ID : 20140415132557-35
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		Amount of Each Receipt this Period 50.00
City Chicago	State IL Zip Code 60631-3512	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer PCI	Occupation Vice President, Political Engagement &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Deirdre Manna		Date of Receipt M M / D D / Y Y Y Y Y 04 / 28 / 2014 Transaction ID : 20140428155815-35
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		Amount of Each Receipt this Period 50.00
City Chicago	State IL Zip Code 60631-3512	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer PCI	Occupation Vice President, Political Engagement &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	204.17
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 64
(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 (PCIPAC)

A. Timothy L. McCarthy
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 Bend of the Bosque Rd
 City State Zip Code
 China Spring TX 76633-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Farm Bureau Group Vice President Actuarial
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2014
Transaction ID : 20140401180017-4
 Amount of Each Receipt this Period
 40.00

B. Timothy L. McCarthy
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 Bend of the Bosque Rd
 City State Zip Code
 China Spring TX 76633-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Farm Bureau Group Vice President Actuarial
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : 20140421150227-4
 Amount of Each Receipt this Period
 40.00

C. Don R. McGuire Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 808 Highway 18 W
 City State Zip Code
 Algona IA 50511-7234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pharmacists Mutual Insurance Company General Counsel Sr. VP Risk Management
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2014
Transaction ID : C9734CB83DACA054069
 Amount of Each Receipt this Period
 240.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
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 32 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Gregory E. Murphy

Mailing Address 40 Wantage Ave

City Branchville State NJ Zip Code 07890-0001

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

Name of Employer Selective Insurance Company of America Occupation Chairman and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2014
Transaction ID : 056048C4086E42878C8A

Amount of Each Receipt this Period
 3600.00

Full Name (Last, First, Middle Initial)
B. Tony Nicely

Mailing Address 1 Geico Plz

City Washington State DC Zip Code 20046-0004

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

Name of Employer GEICO Occupation Chairman and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2014
Transaction ID : 4871A89815D245B78592

Amount of Each Receipt this Period
 3000.00

Full Name (Last, First, Middle Initial)
C. Frances O'Connell

Mailing Address 10 Parkway N

City Deerfield State IL Zip Code 60015-2526

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

Name of Employer Markel Corporation Group Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : 48BCD66E909B615F615

Amount of Each Receipt this Period
 240.00

SUBTOTAL of Receipts This Page (optional).....▶	6840.00
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 33 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Joanne M. Orfanos		Date of Receipt MM / DD / YYYY 04 / 14 / 2014 Transaction ID : 20140415132557-42
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		Amount of Each Receipt this Period 50.00
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. C	Name of Employer PCI	Occupation Senior Vice President, Membership and
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Joanne M. Orfanos		Date of Receipt MM / DD / YYYY 04 / 28 / 2014 Transaction ID : 20140428155815-42
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		Amount of Each Receipt this Period 50.00
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. C	Name of Employer PCI	Occupation Senior Vice President, Membership and
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Leo M. Orth Jr.		Date of Receipt MM / DD / YYYY 04 / 21 / 2014 Transaction ID : 20140422100836-12
Mailing Address 14614 Wilden Dr		Amount of Each Receipt this Period 65.00
City Urbandale	State IA	Zip Code 50323-2070
FEC ID number of contributing federal political committee. C	Name of Employer FBL Financial Group	Occupation Vice President Research & Development
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 34 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Gregory V. Ostergren		Date of Receipt
Mailing Address 5154 S Chelsea Ave		M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014
City	State	Zip Code
Springfield	MO	65804-7711
FEC ID number of contributing federal political committee. C		Transaction ID : 20140423160709-8
Name of Employer American National Property and Casualt		Amount of Each Receipt this Period
Occupation Chairman, President and Chief Executiv		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		1200.00

Full Name (Last, First, Middle Initial) B. Dan D. Pitcher		Date of Receipt
Mailing Address 2508 Country Side PI		M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014
City	State	Zip Code
West Des Moines	IA	50265-7641
FEC ID number of contributing federal political committee. C		Transaction ID : 20140422100836-13
Name of Employer FBL Financial Group		Amount of Each Receipt this Period
Occupation Chief Operating Officer		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		400.00

Full Name (Last, First, Middle Initial) C. F. W. Purmort		Date of Receipt
Mailing Address 800 S Washington St		M M M / D D D / Y Y Y Y Y Y 04 / 08 / 2014
City	State	Zip Code
Van Wert	OH	45891-2357
FEC ID number of contributing federal political committee. C		Transaction ID : C8F11968A784428D1D5
Name of Employer Central Insurance Companies		Amount of Each Receipt this Period
Occupation Chairman of the Board and President		600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		600.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 35 OF 64
	<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 (PCIPAC)

A. William M. Puryear
Full Name (Last, First, Middle Initial)

Mailing Address 400 Candus Cove

City State Zip Code
China Spring TX 76633

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

Name of Employer Occupation
Texas Farm Bureau Group Manager Insurance Company Transition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2014
Transaction ID : 20140401180017-5

Amount of Each Receipt this Period
50.00

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

Mailing Address 400 Candus Cove

City State Zip Code
China Spring TX 76633

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

Name of Employer Occupation
Texas Farm Bureau Group Manager Insurance Company Transition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2014
Transaction ID : 20140421150227-5

Amount of Each Receipt this Period
50.00

C. Timothy G. Reik
Full Name (Last, First, Middle Initial)

Mailing Address 518 E Broad St

City State Zip Code
Columbus OH 43215-3901

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

Name of Employer Occupation
State Auto Insurance Companies Vice President - Risk Evaluation and D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2014
Transaction ID : 095063C455BBB901B56

Amount of Each Receipt this Period
240.00

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 36 OF 64
(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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. M. Jean Reynolds

Mailing Address 518 E Broad St

City Columbus State OH Zip Code 43215-3901

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

Name of Employer State Auto Insurance Companies Occupation Resident Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 04 / 08 / 2014
Transaction ID : F833BCB087A6483FB1DA

Amount of Each Receipt this Period
 1500.00

Full Name (Last, First, Middle Initial)
B. Doug R. Roggenbaum

Mailing Address 3955 Pitt Rd

City Waterford State MI Zip Code 48328-1144

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 ▼
 265.00

Date of Receipt
 04 / 08 / 2014
Transaction ID : 20140408145240-47

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
c. Doug R. Roggenbaum

Mailing Address 3955 Pitt Rd

City Waterford State MI Zip Code 48328-1144

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 ▼
 265.00

Date of Receipt
 04 / 17 / 2014
Transaction ID : 20140417172914-47

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1560.00

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 37 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

A. Richard F. Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 26777 Halsted Rd
 City Farmington Hills State MI Zip Code 48331-3577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation President and Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : 46A4CE2404F521F1C07
 Amount of Each Receipt this Period
 5000.00

B. Robin Russo
 Full Name (Last, First, Middle Initial)
 Mailing Address 4521 Highwoods Pkwy
 City Glen Allen State VA Zip Code 23060-6148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Markel Corporation Group Occupation Executive Underwriting Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2014
Transaction ID : 69C240CEA88D446DB9B0
 Amount of Each Receipt this Period
 250.00

c. David Sampson
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 N Capitol St NW Ste 801
 City Washington State DC Zip Code 20001-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation President and Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 20140415132557-46
 Amount of Each Receipt this Period
 208.08

SUBTOTAL of Receipts This Page (optional).....▶	5458.08
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 38 OF 64
	<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 (PCIPAC)

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

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

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

Name of Employer PCI Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1664.62

Date of Receipt
04 / 28 / 2014
Transaction ID : 20140428155815-46

Amount of Each Receipt this Period
208.08

B. Donald Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 5429 Edinburgh Dr

City Waco State TX Zip Code 76710-1233

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

Name of Employer Texas Farm Bureau Group Occupation Director of Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.50

Date of Receipt
04 / 01 / 2014
Transaction ID : 20140401180017-6

Amount of Each Receipt this Period
42.50

C. Donald Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 5429 Edinburgh Dr

City Waco State TX Zip Code 76710-1233

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

Name of Employer Texas Farm Bureau Group Occupation Director of Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.50

Date of Receipt
04 / 21 / 2014
Transaction ID : 20140421150227-6

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 293.08

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 39 OF 64
	<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 (PCIPAC)

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

Mailing Address 1415 L St
Ste 670

City Sacramento State CA Zip Code 95814-3964

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

Name of Employer PCI Occupation Vice President, State Government Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
04 / 14 / 2014

Transaction ID : 20140415132557-47

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Mark Sektnan

Mailing Address 1415 L St
Ste 670

City Sacramento State CA Zip Code 95814-3964

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

Name of Employer PCI Occupation Vice President, State Government Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
04 / 28 / 2014

Transaction ID : 20140428155815-47

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Matthew J. Simon

Mailing Address 412 Rosario Ln

City White Lake State MI Zip Code 48386-4404

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

Name of Employer Amerisure Companies Occupation Vice President & Chief Financial Offic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
04 / 17 / 2014

Transaction ID : 20140417172914-50

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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 40 OF 64
<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 (PCIPAC)

A. Oyango Snell
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Counsel, State Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 14 / 2014
Transaction ID : 20140415132557-50
Amount of Each Receipt this Period
50.00

B. Oyango Snell
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Counsel, State Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 28 / 2014
Transaction ID : 20140428155815-50
Amount of Each Receipt this Period
50.00

C. David Snyder
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, International Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 14 / 2014
Transaction ID : 20140415132557-51
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 41 OF 64
	<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. David Snyder		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20001-1508
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-51
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Vice President, International Policy		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Judy A. Snyder		Date of Receipt
Mailing Address 518 E Broad St		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Columbus	State OH	Zip Code 43215-3901
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : CF157586902A3D5288F
Name of Employer State Auto Insurance Companies		Amount of Each Receipt this Period
Occupation Personal Insurance Underwriting Manage		<input type="text" value="240.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. Brian M. Steffel		Date of Receipt
Mailing Address 400 NE Baker St		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City McMinnville	State OR	Zip Code 97128-4906
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 75BD8C38637C4196BCF6
Name of Employer Oregon Mutual Insurance Group		Amount of Each Receipt this Period
Occupation President and Chief Executive Officer		<input type="text" value="600.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="890.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 42 OF 64
	<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 (PCIPAC)

A. John A. Stephens
Full Name (Last, First, Middle Initial)
Mailing Address 112 Greentree Dr
City Crawford State TX Zip Code 76638-2770
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas Farm Bureau Insurance Companies Occupation Associate General Counsel
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **218.75**

Date of Receipt **04 / 21 / 2014**
Transaction ID : 20140421150227-7
Amount of Each Receipt this Period **31.25**

B. Michael J. Stone
Full Name (Last, First, Middle Initial)
Mailing Address 9025 N Lindbergh Dr
City Peoria State IL Zip Code 61615-1499
FEC ID number of contributing federal political committee. **C**
Name of Employer RLI Occupation President and Chief Operating Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3600.00**

Date of Receipt **04 / 30 / 2014**
Transaction ID : 256893486368FE9ED5D
Amount of Each Receipt this Period **3600.00**

C. Debra Szmagaj
Full Name (Last, First, Middle Initial)
Mailing Address 1267 Old Milford Farms
City Milford State MI Zip Code 48381-3373
FEC ID number of contributing federal political committee. **C**
Name of Employer Amerisure Companies Occupation Vice President Business Application Se
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **230.00**

Date of Receipt **04 / 08 / 2014**
Transaction ID : 20140408145240-56
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **3656.25**
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 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Debra Szmagaj
Full Name (Last, First, Middle Initial)

Mailing Address 1267 Old Milford Farms

City Milford State MI Zip Code 48381-3373

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

Name of Employer Amerisure Companies Occupation Vice President Business Application Se

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
04 / 17 / 2014
Transaction ID : 20140417172914-56

Amount of Each Receipt this Period
25.00

B. Marguerite Tortorello
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave Ste 1200S

City Chicago State IL Zip Code 60631-3512

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 ▼ 400.00

Date of Receipt
04 / 14 / 2014
Transaction ID : 20140415132557-55

Amount of Each Receipt this Period
50.00

C. Marguerite Tortorello
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave Ste 1200S

City Chicago State IL Zip Code 60631-3512

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 ▼ 400.00

Date of Receipt
04 / 28 / 2014
Transaction ID : 20140428155815-55

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 44 OF 64
(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 (PCIPAC)

A. Edward H. Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 1259 Dorchester Rd
City Birmingham State MI Zip Code 48009-5995
FEC ID number of contributing federal political committee. **C**
Name of Employer Amerisure Companies Occupation Chief Underwriting Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **265.00**

Date of Receipt **04 / 08 / 2014**
Transaction ID : 20140408145240-59
Amount of Each Receipt this Period **30.00**

B. Edward H. Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 1259 Dorchester Rd
City Birmingham State MI Zip Code 48009-5995
FEC ID number of contributing federal political committee. **C**
Name of Employer Amerisure Companies Occupation Chief Underwriting Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **265.00**

Date of Receipt **04 / 17 / 2014**
Transaction ID : 20140417172914-59
Amount of Each Receipt this Period **30.00**

C. James D. Wallace
Full Name (Last, First, Middle Initial)
Mailing Address 1111 Ashworth Rd
City West Des Moines State IA Zip Code 50265-3544
FEC ID number of contributing federal political committee. **C**
Name of Employer GuideOne Insurance Occupation Chairman, President and Chief Executiv
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 09 / 2014**
Transaction ID : 0C9C15CD98BB44168CD0
Amount of Each Receipt this Period **5000.00**

SUBTOTAL of Receipts This Page (optional)..... **5060.00**
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 45 OF 64
	<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 (PCIPAC)

A. Timothy A. Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 344 Route 9W
City Glenmont State NY Zip Code 12077-2910
FEC ID number of contributing federal political committee. **C**
Name of Employer Farm Family Casualty Insurance Company Occupation President, Chief Executive Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **04 / 03 / 2014**
Transaction ID : 20140404193130-1
Amount of Each Receipt this Period **50.00**

B. Timothy A. Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 344 Route 9W
City Glenmont State NY Zip Code 12077-2910
FEC ID number of contributing federal political committee. **C**
Name of Employer Farm Family Casualty Insurance Company Occupation President, Chief Executive Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **04 / 21 / 2014**
Transaction ID : 20140421150058-1
Amount of Each Receipt this Period **50.00**

C. John L. Watson
Full Name (Last, First, Middle Initial)
Mailing Address 1 Park Cir
City Westfield Center State OH Zip Code 44251-9700
FEC ID number of contributing federal political committee. **C**
Name of Employer Westfield Group Occupation Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 08 / 2014**
Transaction ID : 7D90B1A9C0CC9FEF16E
Amount of Each Receipt this Period **600.00**

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

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

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

FOR LINE NUMBER: PAGE 46 OF 64
(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 (PCIPAC)

A. Ann Weber
Full Name (Last, First, Middle Initial)
Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S
City Chicago State IL Zip Code 60631-3512
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2014
Transaction ID : 20140415132557-56
Amount of Each Receipt this Period 50.00

B. Ann Weber
Full Name (Last, First, Middle Initial)
Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S
City Chicago State IL Zip Code 60631-3512
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2014
Transaction ID : 20140428155815-56
Amount of Each Receipt this Period 50.00

C. Deborah Wensel
Full Name (Last, First, Middle Initial)
Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S
City Chicago State IL Zip Code 60631-3512
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Senior Vice President, Chief Financial
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 04 / 14 / 2014
Transaction ID : 20140415132557-57
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 47 OF 64
<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Deborah Wensel		Date of Receipt
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Chicago	State IL	Zip Code 60631-3512
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-57
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Senior Vice President, Chief Financial		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="800.00"/>

Full Name (Last, First, Middle Initial) B. Nathaniel Wienecke		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20001-1508
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140415132557-58
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Senior Vice President, Federal Governm		<input type="text" value="167.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1586.00"/>

Full Name (Last, First, Middle Initial) C. Nathaniel Wienecke		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20001-1508
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140428155815-58
Name of Employer PCI		Amount of Each Receipt this Period
Occupation Senior Vice President, Federal Governm		<input type="text" value="167.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1586.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="434.00"/>
TOTAL 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 48 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (PCIPAC)

Full Name (Last, First, Middle Initial) A. Nathaniel Wienecke		Date of Receipt
Mailing Address 444 N Capitol St NW Ste 801		M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014
City Washington	State DC	Zip Code 20001-1508
FEC ID number of contributing federal political committee.	C	Transaction ID : 6F7FE5ABCD4847DAB80D
Name of Employer PCI	Occupation Senior Vice President, Federal Governm	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
	1586.00	

Full Name (Last, First, Middle Initial) B. Joe Woods		Date of Receipt
Mailing Address 1504 San Antonio St		M M M / D D D / Y Y Y Y Y Y 04 / 14 / 2014
City Austin	State TX	Zip Code 78701-1613
FEC ID number of contributing federal political committee.	C	Transaction ID : 20140415132557-59
Name of Employer PCI	Occupation Vice President, State Government Relat	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 ▼	50.00
	400.00	

Full Name (Last, First, Middle Initial) C. Joe Woods		Date of Receipt
Mailing Address 1504 San Antonio St		M M M / D D D / Y Y Y Y Y Y 04 / 28 / 2014
City Austin	State TX	Zip Code 78701-1613
FEC ID number of contributing federal political committee.	C	Transaction ID : 20140428155815-59
Name of Employer PCI	Occupation Vice President, State Government Relat	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 ▼	50.00
	400.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 49 OF 64
(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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Edward J. Yorty

Mailing Address 808 Highway 18 W

City State Zip Code
Algona IA 50511-7234

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

Name of Employer Occupation
Pharmacists Mutual Insurance Company President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2014
Transaction ID : 4879F6D852A94C798408

Amount of Each Receipt this Period
600.00

Full Name (Last, First, Middle Initial)
B. Keith A. Yun

Mailing Address 518 E Broad St

City State Zip Code
Columbus OH 43215-3901

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

Name of Employer Occupation
State Auto Insurance Companies Director - Standard Lines Strategic In

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2014
Transaction ID : 3EFCCDB1565E4453B0FA

Amount of Each Receipt this Period
375.00

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
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	975.00
TOTAL This Period (last page this line number only).....▶	57973.85

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

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

FOR LINE NUMBER: PAGE 50 OF 64
(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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. American Family Mutual Insurance Company Federal PAC (AMFAM PAC)
 Mailing Address 6000 American Parkway
 City Madison State WI Zip Code 53783
 FEC ID number of contributing federal political committee. **C** C00354290
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : 68BE63DF564B493D8553
 Amount of Each Receipt this Period
 5000.00

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
 M M / D D / Y Y Y Y Y Y
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 64
(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 (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Property Casualty Insurers Association of America

Mailing Address 8700 West Bryn Mawr Ave

City Chicago State IL Zip Code 60631

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3527.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : 194F488EE9384E398930

Amount of Each Receipt this Period
650.96

Offset to Operating Exp April 2014

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	650.96
TOTAL This Period (last page this line number only).....▶	650.96

**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 checked="" 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 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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 04-01-2014

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : 286C08BD969C1D906F0

Amount of Each Disbursement this Period

43.80

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
BoA CC Fees 04-03-2014

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Transaction ID : 3EFBEB0DB89D5B7D62B

Amount of Each Disbursement this Period

484.46

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-08-2014

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2014

Transaction ID : 323153286BC317EDEF7

Amount of Each Disbursement this Period

44.94

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

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

573.20

**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 checked="" 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 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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-16-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : ACB879684FF31A2DFFF

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-17-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1BDA78B057EE6F6FFD7

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-22-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 80604C527B40741647F

Amount of Each Disbursement this Period

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

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)

<input checked="" 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 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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-25-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 96368B9660461A17249

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fees 04-28-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : A2F2611B9388B11820C

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Beatty for Congress

Mailing Address PO Box 172

City Columbus State OH Zip Code 43216

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Joyce Beatty

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : 6F3C9B92E1BB664D776

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Blaine for Congress

Mailing Address PO Box 1025

City Jefferson City State MO Zip Code 65102

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

W. Blaine Luetkemeyer

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : F409D8DD859AD1BAD45

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Citizens for Waters

Mailing Address 3700 Wilshire Blvd., Ste. 1050-B

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Maxine Waters

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 43

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : 136C36C36C92EE861EC

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Fitzpatrick for Congress

Mailing Address PO Box 185

City Langhorne State PA Zip Code 19047-0185

Purpose of Disbursement
2014 Primary

011

Candidate Name

Michael G. Fitzpatrick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Transaction ID : 6550D4BEEDF7E731F4D

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Friends of Bill Posey

Mailing Address PO Box 411486

City Melbourne State FL Zip Code 32941

Purpose of Disbursement
2014 Primary

011

Candidate Name

Bill Posey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 08

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : D9383EA23F158C76649

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Bill Posey

Mailing Address PO Box 411486

City Melbourne State FL Zip Code 32941

Purpose of Disbursement
2014 General

011

Candidate Name

Bill Posey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 08

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : E52E10E5F41B7BBA491

Amount of Each Disbursement this Period

2000.00

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

4000.00

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Dennis Ross

Mailing Address 133 South Harbor Drive

City Venice State FL Zip Code 34285

Purpose of Disbursement
Voided 3/12/2014 contribution

011

Category/
Type

Candidate Name

Dennis A. Ross

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 15

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : **BB4E233C009E4D7528B**

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Mark Warner

Mailing Address 201 North Union Street Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Mark Robert Warner

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Transaction ID : **3A672A518AB0513A317**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Mulvaney for Congress

Mailing Address PO Box 1975

City Lancaster State SC Zip Code 29721

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

John Michael Mulvaney

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 05

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : **C626B5D9CAD9B09F39C**

Amount of Each Disbursement this Period

2500.00

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. National Republican Senatorial Committee

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
2014 Contribution

011

Candidate Name

National Republican Senatorial Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 2406BB69A7CEE08869C

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116-0581

Purpose of Disbursement
Voided 3/12/2014 contribution

011

Candidate Name

Mike J. Rogers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: MI District: 08

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 72CBF0ED5E728552BA3

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. Ron Johnson for Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
2016 Primary

011

Candidate Name

Ronald H. Johnson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

State: WI District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Transaction ID : 63E96B1112E61CF1109

Amount of Each Disbursement this Period

2500.00

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

6500.00

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Stutzman for Congress

Mailing Address PO Box 129

City Howe State IN Zip Code 46746

Purpose of Disbursement
2014 Primary

011

Candidate Name

Marlin Andrew Stutzman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	4

Transaction ID : 88D9AA1343C4E9577AD

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Treasure State PAC

Mailing Address 3242 Cummins Way

City Missoula State MT Zip Code 59802

Purpose of Disbursement
2014 Contribution

011

Candidate Name

Treasure State PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : B389BA49F238CD6EFA7

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Vargas for Congress

Mailing Address 330 Encinitas Blvd., Suite 101

City Encinitas State CA Zip Code 92024

Purpose of Disbursement
2014 Primary

011

Candidate Name

Juan C. Vargas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	4

Transaction ID : A39D196CA66DDBCC7C5

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

3	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

2	2	5	0	.	0	0
---	---	---	---	---	---	---

**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 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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Batchelder for Representative Committee

Mailing Address 20 S Front Street 2nd Floor

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Transaction ID : E12D48D744AAFC841D3

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Garland Pierce

Mailing Address 21981 Buie Street

City Wagram State NC Zip Code 28396

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Transaction ID : 7345B05BA29D0B0FFCF

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Jeff Collins

Mailing Address P.O. Box 8078

City Rocky Mount State NC Zip Code 27804

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Transaction ID : D0F97EB0EA171F538B8

Amount of Each Disbursement this Period

500.00

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

1600.00

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Don White

Mailing Address P. O. Box 363

City State Zip Code
Indiana PA 15701

Purpose of Disbursement
Nonfederal Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : 28BD504DC3CE874815C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Sam Cann

Mailing Address 21 Maple Lake

City State Zip Code
Bridgeport WV 26330

Purpose of Disbursement
Nonfederal Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : D96AC564620C6BB340C

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Harry Brown for NC Senate

Mailing Address 2223 N. Marine Blvd

City State Zip Code
Jacksonville NC 28546

Purpose of Disbursement
Nonfederal Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : 7D06EEAA9FAB30D558D

Amount of Each Disbursement this Period

750.00

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

2250.00

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Harry J. Warren for NC 77

Mailing Address 201 Kingsbridge Road

City Salisbury State NC Zip Code 28144

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

Transaction ID : 535CB5C6BC85560F62F

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Justin Burr for NC House

Mailing Address P.O. Box 1966

City Albemarle State NC Zip Code 28002

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

Transaction ID : 268FC249B0FA92E99E7

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. NC Healthy Leadership Committee

Mailing Address P.O. Box 1054

City Morrisville State NC Zip Code 27560

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

Transaction ID : 837B5E6B62F241BB105

Amount of Each Disbursement this Period

500.00

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

1500.00

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

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**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 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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Philip E. Berger Committee

Mailing Address P. O. Box 1309

City Edén State NC Zip Code 27289

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Transaction ID : AC704C72E6C172ED00B

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Riemer for Assembly

Mailing Address 3053 S. 39th St.

City Milwaukee State WI Zip Code 53215

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Transaction ID : 72DC90AC4BA7D8CD145

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Susi Hamilton for NC State House

Mailing Address P.O. Box 637

City Wilmington State NC Zip Code 28402

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Transaction ID : A97CA6E1EEB833892B9

Amount of Each Disbursement this Period

250.00

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

1500.00

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)

<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 (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Wesley Meredith for Senate

Mailing Address P.O. Box 27398

City Fayetteville State NC Zip Code 28314

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : CDAC55D7D86671DFC33

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

500.00

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

7350.00