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Image# 202101289413593161

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKWI 3X	For	Other Than A	An Authorized	l Commit	ttee		Office Use Only	
NAME OF COMMITTEE (in the community of the community		E OR PRINT ▼		mple: If typer the lines.		12FE4M5		
REINSURANCI	E ASSOCI	ATION OF A	AMERICA P	OLITICA	AL ACTION	N COMMIT	TEE INC (F	REPAC)
		445 NEW YORK)					
ADDRESS (number and	I street)	145 NEW YORK /	AVENUE NVV					
▼ Check if diffe		TH FLOOR						
than previous reported. (AC		VASHINGTON				DC L	20005	
2. FEC IDENTIFICA	ATION NUMB	ER ▼	CITY ▲			STATE A	ZIP CC	DDE 🛦
C C00256453	3		3. IS THIS REPORT	x	NEW (N) OR	AME (A)	ENDED	
4. TYPE OF REP (Choose One)	ORT (b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Jun 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Rep	orts:		` '	H	, ,			(Non-Election Year Only)
April 15 Quarterly	Report (Q1)	(c) 12-Day	Apr 20 (M4)	Primary (12	Jul 20 (M7)	General (1	0 (M10) x	Jan 31 (YE) Runoff (12R)
July 15 Quarterly	Report (Q2)	PRE-Elec		Convention		Special (1		nulioli (12h)
October Quarterly	15 Report (Q3)				()	(-,	
January : Year-End	31 Report (YE)		Election on	M I M	/ D D /	Y I Y I Y I Y	in the State of	of
Year Only	Non-election y) (MY)	(d) 30-Day POST-El Report fo		General (3	0G)	Runoff (30	DR)	Special (30S)
Terminati (TER)	on Report		Election on	M = M	/ D = D /	Y " Y " Y " Y	in the State o	of
5. Covering Period	11	24 Y	2020	through	12 M	31	2020	
I certify that I have ex		eport and to the	best of my know	wledge and	d belief it is tru	e, correct and	complete.	
Type or Print Name of		iuliei, Frankliii, , ,						
Signature of Treasurer	Nutter, Fro	unklin, , ,		[Electronica	ully Filed]	pate 01	28	2021
NOTE: Submission of fa	alse, erroneous	or incomplete in	formation may su	ıbject the pe	erson signing th	is Report to the	e penalties of 52	U.S.C. § 30109
Office Use							FEC FOR Rev. 05/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1, 2020		18140.76
(b) Cash on Hand at Beginning of Reporting Period	3429.71	
(c) Total Receipts (from Line 19)	1788.32	17740.03
(d	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5218.03	35880.79
. To	otal Disbursements (from Line 31)	1537.80	32200.56
R	ash on Hand at Close of eporting Period ubtract Line 7 from Line 6(d))	3680.23	3680.23
th	ebts and Obligations Owed TO e Committee (Itemize all on chedule C and/or Schedule D)	0.00	
th	ebts and Obligations Owed BY e Committee (Itemize all on chedule C and/or Schedule D)	0.00	

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC)

Report Covering the Period: From:	11 24 2020 To:	12 31 2020
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)	1788.32	15240.00
(i) itemized (use obliedule A)	4 4	
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	1788.32	15240.00
(I) P (III P O III	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	4 4
(such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines	7 7 7	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	1788.32	17740.00
12. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
10. 7 iii 20ano 110001700	42 42 42	45 45
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures	4	4 4
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.03
18. Transfers from Non-Federal and Levin Fund		45 45 45
(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),	****	17740.00
12, 13, 14, 15, 16, 17, and 18(c))▶	1788.32	17740.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	1788.32	17740.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: — (a) Allocated Federal/Non-Federal		Odionadi Todi to Bato
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	37.80	200.56
(add 21(a)(i), (a)(ii), and (b))▶	37.80	200.56
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	
and Other Political Committees	1500.00	32000.00
(use Schedule E)	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	7 7	000
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity (from Schedule H6))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1537.80	32200.56
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	1537.80	32200.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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			9
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) n Line 11(d), page 3)	1788.32	17740.00
	Contribution Refunds	0.00	0.00
(subt	Contributions (other than loans) tract Line 34 from Line 33)	1788.32	17740.00
	Federal Operating Expenditures Line 21(a)(i) and Line 21(b))▶	37.80	200.56
	ets to Operating Expenditures 1 Line 15, page 3)	0.00	0.00
	Operating Expenditures tract Line 37 from Line 36)	37.80	200.56

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

FO	R LINE	NUMBER	PAGE	6	OF	16	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or	for commercial purposes, other than using the na	ame and add	ress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION	OF AME	RICA POLITICAL ACTI	ON COMMITTEE INC (REPAC)
Α.	Full Name of Individual (Last, First, Middle Initial Austin, Nicole, , , Mailing Address 1445 New York Avenue NW) or Full Orga	anization Name	Date of Receipt
	7th Floor City	State	Zip Code	12 04 2020 Transaction ID : SA11AI2147483534
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Reinsurance Assn of America		ation (for Individual) Vice President, Federal Affairs	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 4615.44	
В.	Full Name of Individual (Last, First, Middle Initial Austin, Nicole, , , Mailing Address 1445 New York Avenue NW) or Full Orga	anization Name	Date of Receipt
	7th Floor City Washington	State	Zip Code 20005	12 14 2020 Transaction ID : SA11AL-2147483533 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2000	192.31
	Name of Employer (for Individual) Reinsurance Assn of America		ation (for Individual) Vice President, Federal Affairs	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 4807.75	
 с.	Full Name of Individual (Last, First, Middle Initial Austin, Nicole, , ,) or Full Orga	anization Name	Date of Receipt
	Mailing Address 1445 New York Avenue NW 7th Floor	Ctata	Tip Oada	12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Washington	State DC	Zip Code 20005	Transaction ID : SA11AI2147483532 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.25
	Name of Employer (for Individual) Reinsurance Assn of America		ation (for Individual) Vice President, Federal Affairs	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 5000.00	
s	SUBTOTAL of Receipts This Page (optional)			576.87
Т	OTAL This Period (last page this line number on	ly)		

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

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.					
\rangle	NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION	OF AMERICA POLITICAL ACTION	ON COMMITTEE INC (REPAC)					
Α.	Full Name of Individual (Last, First, Middle Initial Burke, Dennis, $C.$,	al) or Full Organization Name	Date of Receipt					
	Mailing Address 1445 New York Avenue NW 7th Floor		12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Washington	State Zip Code DC 20005	Transaction ID : SA11AI2147483531 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	20.00					
	Name of Employer (for Individual) Reinsurance Assn of America Receipt For: Primary General	Occupation (for Individual) Vice President State Relations Aggregate Year-to-Date ▼	Memo Item					
	Other (specify) ▼	480.00						
В.	Full Name of Individual (Last, First, Middle Initial Burke, Dennis, $C., ,$	al) or Full Organization Name	Date of Receipt					
	Mailing Address 1445 New York Avenue NW 7th Floor		12 14 2020					
	City Washington	State Zip Code DC 20005	Transaction ID : SA11AL-2147483530 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	20.00					
	Name of Employer (for Individual) Reinsurance Assn of America	Occupation (for Individual) Vice President State Relations	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00						
<u> </u>	Full Name of Individual (Last, First, Middle Initia	al) or Full Organization Name	Date of Receipt					
	Mailing Address 1445 New York Avenue NW 7th Floor		12 31 2020					
	City Washington	State Zip Code DC 20005	Transaction ID : SA11AI2147483529 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	20.00					
	Name of Employer (for Individual) Reinsurance Assn of America Receipt For:	Occupation (for Individual) Vice President State Relations	Memo Item					
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 520.00						
S	SUBTOTAL of Receipts This Page (optional)	<u> </u>	60.00					
т	OTAL This Period (last page this line number of	oly)						

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

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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) REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carroll, Barbara, W., Ms, Date of Receipt Mailing Address 1445 New York Avenue NW 7th Floor 2020 City Zip Code State Transaction ID: SA11AI.-2147483528 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Director of Membership & Communicat Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carroll, Barbara, W., Ms, Date of Receipt Mailing Address 1445 New York Avenue NW 12 14 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483527 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Director of Membership & Communica Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Carroll, Barbara, W., Ms, Date of Receipt Mailing Address 1445 New York Avenue NW 2020 7th Floor City Zip Code State Transaction ID: SA11AI.-2147483526 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Director of Membership & Communicati Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cohen, Marsha, , , Date of Receipt Mailing Address 1445 New York Avenue NW 7th Floor 2020 City Zip Code State Transaction ID: SA11AI.-2147483525 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sr. VP & Director of Education Reinsurance Assn of America Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cohen, Marsha, , , Date of Receipt Mailing Address 1445 New York Avenue NW 14 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483524 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Sr. VP & Director of Education Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cohen, Marsha, , , Date of Receipt Mailing Address 1445 New York Avenue NW 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483523 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Sr. VP & Director of Education Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Martin, Paul, , , Date of Receipt Mailing Address 1445 New York Ave NW, 7th Floor 2020 City Zip Code State Transaction ID: SA11AI.-2147483522 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President, State Relations Reinsurance Assn of America Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Martin, Paul, , , Date of Receipt Mailing Address 1445 New York Ave NW, 7th Floor 14 2020 City State Zip Code Transaction ID : SA11AL-2147483521 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Vice President, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Martin, Paul, , , Date of Receipt Mailing Address 1445 New York Ave NW, 7th Floor 2020 City Zip Code State Transaction ID : SA11AI.-2147483520 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Vice President, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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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) REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morell, Karalee, , , Date of Receipt Mailing Address 1445 New York Avenue NW 7th Floor 2020 City Zip Code State Transaction ID: SA11AI.-2147483519 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President & Asst. General Counse Reinsurance Assn of America Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Morell, Karalee, , , Date of Receipt Mailing Address 1445 New York Avenue NW 14 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483518 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Vice President & Asst. General Counse Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Morell, Karalee, , , Date of Receipt Mailing Address 1445 New York Avenue NW 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483517 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America Vice President & Asst. General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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or	for commercial purposes, other than using the na	ame and add	ress of any political committee to	solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION	OF AMER	RICA POLITICAL ACTI	ON COMMITTEE INC (REPAC)						
Α.	Full Name of Individual (Last, First, Middle Initial Nutter, Franklin, , , Mailing Address 1445 New York Avenue NW 7th Floor) or Full Orga	anization Name	Date of Receipt 12 04 2020						
	City	State	Zip Code	Transaction ID : SA11AI2147483516						
	Washington	DC	20005	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		153.85						
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item						
	Reinsurance Assn of America	Preside	ent	_						
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 3692.40							
В.	Full Name of Individual (Last, First, Middle Initial Nutter, Franklin, , , Mailing Address 1445 New York Avenue NW) or Full Orga	anization Name	Date of Receipt						
	7th Floor City	State	Zip Code	12 14 2020						
	Washington	DC	20005	Transaction ID: SA11AL-2147483515						
		100	20003	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		153.85						
	Name of Employer (for Individual) Reinsurance Assn of America	Occupa Presid	ation (for Individual) ent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 3846.25							
<u> </u>	Full Name of Individual (Last, First, Middle Initial Nutter, Franklin, , ,) or Full Orga	anization Name	Date of Receipt						
	Mailing Address 1445 New York Avenue NW 7th Floor			12 31 2020						
	City	State	Zip Code	Transaction ID : SA11AI2147483514						
	Washington	DC	20005	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		153.75						
	Name of Employer (for Individual) Reinsurance Assn of America	Occupa Preside	ation (for Individual) ent	Memo Item						
		Aggregate Ye	ar-to-Date ▼							
	Primary General Other (specify)		4000.00							
s	UBTOTAL of Receipts This Page (optional)			461.45						
Т	OTAL This Period (last page this line number onl	y)								

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) REINSURANCE ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE INC (REPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sieverling, Joseph, B., Mr., Date of Receipt Mailing Address 1445 New York Avenue NW 7th Floor 2020 City Zip Code State Transaction ID: SA11AI.-2147483513 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **VP & Director of Financial Services** Reinsurance Assn of America Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sieverling, Joseph, B., Mr., Date of Receipt Mailing Address 1445 New York Avenue NW 12 14 2020 7th Floor City State Zip Code Transaction ID : SA11AI.-2147483512 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America VP & Director of Financial Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Sieverling, Joseph, B., Mr., Date of Receipt Mailing Address 1445 New York Avenue NW 2020 7th Floor City Zip Code State Transaction ID : SA11AI.-2147483511 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reinsurance Assn of America VP & Director of Financial Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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