

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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

2. **FEC IDENTIFICATION NUMBER** C00066472  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 04 01 2009 through 04 30 2009

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

Type or Print Name of Treasurer June Holmes

Signature of Treasurer Electronically Filed by June Holmes Date 05 20 2009

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

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

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		44688.07
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	90536.42									
(c) Total Receipts (from Line 19) .....	57033.69	221472.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	147570.11	266160.11								
7. Total Disbursements (from Line 31) .....	13200.00	131790.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	134370.11	134370.11								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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	30442.07	127355.17
(i) Itemized (use Schedule A) .....	9589.47	38101.93
(ii) Unitemized .....	40031.54	165457.10
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	17000.00	56000.00
(c) Other Political Committees (such as PACs) .....	57031.54	221457.10
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.15	14.94
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	57033.69	221472.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	57033.69	221472.04

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	127500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	3200.00	4290.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13200.00	131790.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13200.00	131790.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	57031.54	221457.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	57031.54	221457.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.**

Full Name (Last, First, Middle Initial)  
Scott J Seymour

Mailing Address 696 Acadia Way

City State Zip Code  
Verona WI 53593-8227

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

Name of Employer American Family Insurance Group  
Occupation Vice President - Government Affair & C

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** 29734355

Amount of Each Receipt this Period  
600.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jerome G. Rekowski

Mailing Address 1993 Skyline Drive

City State Zip Code  
Stoughton WI 53589-3253

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

Name of Employer American Family Insurance Group  
Occupation Vice President-Commercial and Farm-Ran

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** 29734356

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel R. Schultz

Mailing Address 1208 Pocahontas Drive

City State Zip Code  
Monona WI 53716-2961

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

Name of Employer American Family Insurance Group  
Occupation Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** 29734357

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1500.00**

**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 7 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Jack C Salzwedel

Mailing Address 5117 St Cyr Road

City Middleton State WI Zip Code 53562-2457

FEC ID number of contributing federal political committee. C

Name of Employer American Family Insurance Group  
Occupation President and COO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 03 / 2009

**Transaction ID:** 29734358

Amount of Each Receipt this Period 1200.00

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

Mailing Address 3557 Neal's Gulf Road

City New Hartford State NY Zip Code 13413-5720

FEC ID number of contributing federal political committee. C

Name of Employer Utica First Insurance Company  
Occupation Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 03 / 2009

**Transaction ID:** 29734359

Amount of Each Receipt this Period 250.00

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

Mailing Address 9 Hickory Drive

City Columbus State NJ Zip Code 08022-2235

FEC ID number of contributing federal political committee. C

Name of Employer Farmers Insurance Company of Flemington  
Occupation President and CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 03 / 2009

**Transaction ID:** 29734360

Amount of Each Receipt this Period 240.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1690.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Wallace

Mailing Address 6023 N Waterbury Road

City State Zip Code  
Des Moines IA 50312-1343

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GuideOne Insurance President and Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 3 / 2 0 0 9

**Transaction ID:** 29734421

Amount of Each Receipt this Period 1200.00

**B.** Full Name (Last, First, Middle Initial)  
Janice K. Beckstrom

Mailing Address 14231 Ridgemont Dr.

City State Zip Code  
Urbandale IA 50323-2284

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GuideOne Insurance Sr Vice President - Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

**Transaction ID:** 29734594

Amount of Each Receipt this Period 240.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael J. Stone

Mailing Address 142 W Detweiller Drive

City State Zip Code  
Peoria IL 61615-2111

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RLI President & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** 29774156

Amount of Each Receipt this Period 2700.00

**SUBTOTAL** of Receipts This Page (optional) ..... 4140.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Andrew Furgatch		Date of Receipt MM / DD / YYYY 04 / 14 / 2009		
	Mailing Address c/o PSM Insurance Companies One Park Avenue		<b>Transaction ID:</b> 29774158		
	City New York	State NY	Zip Code 10016-5802	Amount of Each Receipt this Period 2700.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Magna Carta Companies	Occupation Chairman and CEO			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Karen S. Fulton		Date of Receipt MM / DD / YYYY 04 / 15 / 2009		
	Mailing Address 200 Country Lane		<b>Transaction ID:</b> 29788030		
	City Langhorne	State PA	Zip Code 19047-2110	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer ARI Mutual Insurance Company	Occupation President and Chief Executive Officer			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph A. Desmond		Date of Receipt MM / DD / YYYY 04 / 20 / 2009		
	Mailing Address Woodwells Garrison		<b>Transaction ID:</b> 29799831		
	City Contoocook	State NH	Zip Code 03229	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Concord Group Insurance Companies	Occupation Chairman, President and Chief Executive Officer			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph Volponi	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address 1981 Vista Del Mar	<b>Transaction ID:</b> 29799858
	City State Zip Code San Mateo CA 94404-2493	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer California Casualty Group	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. June T. Holmes	Date of Receipt MM / DD / YYYY 04 / 23 / 2009
	Mailing Address 409 S. Vine	<b>Transaction ID:</b> 29840211
	City State Zip Code Park Ridge IL 60068-4145	Amount of Each Receipt this Period 315.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer PCI	Occupation Treasurer & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 945.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph Chu Muenzen	Date of Receipt MM / DD / YYYY 04 / 23 / 2009
	Mailing Address 1060 Deanna Dr.	<b>Transaction ID:</b> 29840214
	City State Zip Code Menlo Park CA 94025-6617	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer California Casualty Group	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>915.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Nancy D. Edwards	Date of Receipt MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 2615 Johnston Road	<b>Transaction ID:</b> 29840220
	City State Zip Code Columbus OH 43220-4532	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer State Auto Insurance Companies	Occupation VP Special Projects	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Matthew S. Mrozek	Date of Receipt MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 1877 Bierstad Drive	<b>Transaction ID:</b> 29840222
	City State Zip Code Powell OH 43065-8816	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer State Auto Insurance Companies	Occupation Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. David R. Russell	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 6351 Champions Drive	<b>Transaction ID:</b> 29847352
	City State Zip Code Westerville OH 43082-8595	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer State Auto Insurance Companies	Occupation AVP Enterprise Network Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>825.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 35  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A.**

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

Mailing Address 6921 Four Winds Ct.

City Brownsburg State IN Zip Code 46112-8467

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

Name of Employer State Auto Insurance Companies  
Occupation Assistant Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: 29847359  
Amount of Each Receipt this Period: 300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Douglas E. Allen

Mailing Address 145 N High St. #1101

City Columbus State OH Zip Code 43215-3006

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

Name of Employer State Auto Insurance Companies  
Occupation COO & Senior vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: 29847361  
Amount of Each Receipt this Period: 350.00

**C.**

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

Mailing Address 4949 Red Bank Road

City Galena State OH Zip Code 43021-9608

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

Name of Employer State Auto Insurance Companies  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: 29847362  
Amount of Each Receipt this Period: 601.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1251.00

**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 13 / 35  
(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

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. David W. Dalton

Mailing Address 3450 Heritage Oaks Drive

City Hilliard State OH Zip Code 43026-7636

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

Name of Employer State Auto Insurance Companies Occupation V P - Director of Internal Audit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2009

**Transaction ID: 29847377**

Amount of Each Receipt this Period 300.00

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

Mailing Address 57 E. Delaware #2105

City Chicago State IL Zip Code 60611-1476

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

Name of Employer PCI Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 839.00

Date of Receipt 04 / 23 / 2009

**Transaction ID: 29848575**

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. M. Jean Reynolds

Mailing Address 3037 Leeds Road

City Columbus State OH Zip Code 43221-2628

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

Name of Employer State Auto Insurance Companies Occupation Resident VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 04 / 23 / 2009

**Transaction ID: 29848577**

Amount of Each Receipt this Period 1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00

**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 14 / 35  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A.**

Full Name (Last, First, Middle Initial)  
Clyde H Fitch

Mailing Address 697 Dennison Ave

City Columbus State OH Zip Code 43215-1605

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

Name of Employer State Auto Insurance Companies  
Occupation Sr VP Chief Sales Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2009  
Transaction ID: 29848578  
Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Craig L. Segbers

Mailing Address 12293 Mallard Pound CT.

City Pickerington State OH Zip Code 43147-8478

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

Name of Employer State Auto Insurance Companies  
Occupation Systems Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 27 / 2009  
Transaction ID: 29848579  
Amount of Each Receipt this Period 240.00

**C.**

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

Mailing Address 5961 Morganwood Sq.

City Hilliard State OH Zip Code 43026-7176

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

Name of Employer State Auto Insurance Companies  
Occupation Director of Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2009  
Transaction ID: 29848901  
Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1140.00**

**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 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Kim Eri Bailey	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 12436 Stone Drive	<b>Transaction ID:</b> 29848904
	City State Zip Code Indianapolis IN 46236-9209	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer State Auto Insurance Companies	Occupation Director Shared Business Applications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Rick L. Holbein	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 5531 Aryshire Court	<b>Transaction ID:</b> 29848928
	City State Zip Code Dublin OH 43017-9440	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer State Auto Insurance Companies	Occupation Branch Manager - VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Hong Chen	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 224 Thatcher Lane	<b>Transaction ID:</b> 29848931
	City State Zip Code Foster City CA 94404-3949	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer California Casualty Group	Occupation Vice President Actuarial	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>840.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jackie A. Gatlin	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 7965 Ruststone Court	<b>Transaction ID:</b> 29848932
	City State Zip Code Colorado Springs CO 80919-2921	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation California Casualty Group Vice President Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen J Denino	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 5387 Meadow Grove Dr.	<b>Transaction ID:</b> 29849281
	City State Zip Code Grove City OH 43123-8782	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation State Auto Insurance Companies Manager - IT Governance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Joyce K. Wright	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 5635 Woodworth Way	<b>Transaction ID:</b> 29849515
	City State Zip Code Indianapolis IN 46237-3169	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation State Auto Insurance Companies Vice President, IRO Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1040.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Donald L. Spickler	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 4041 Fairway Drive	<b>Transaction ID:</b> 29849672
	City State Zip Code Medina OH 44256-7849	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer State Auto Insurance Companies Occupation Resident Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Michael L. Browne	Date of Receipt MM / DD / YYYY 04 / 23 / 2009
	Mailing Address 1900 Hollow Road	<b>Transaction ID:</b> 29849674
	City State Zip Code Collegetown PA 19426-1451	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Harleysville Insurance Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Karen Murphy	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 1742 Seagull Court Apt 305	<b>Transaction ID:</b> 29854398
	City State Zip Code Reston VA 20194-4309	Amount of Each Receipt this Period 325.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medmarc Insurance Group Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3675.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. David C. Cruikshank

Mailing Address 4716 18th Avenue, West

City State Zip Code  
Bradenton FL 34209-5120

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

Name of Employer Service Insurance Group Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID: 29865233**

Amount of Each Receipt this Period  
600.00

**B.**

Full Name (Last, First, Middle Initial)  
Douglas F. Bennett

Mailing Address 2525 N Nelson Street

City State Zip Code  
Arlington VA 22207-5029

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

Name of Employer Liberty Mutual Group Occupation VP Federal & International Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID: 29865234**

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
James F Nayden

Mailing Address 1711 Marshall CT

City State Zip Code  
Annapolis MD 21401-6519

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

Name of Employer GEICO Occupation VP and Legal Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID: 29865235**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

**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 19 / 35  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert W. Minto, Jr.

Mailing Address 912 Parkview Way

City State Zip Code  
Missoula MT 59803-2320

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

Name of Employer: Attorneys Liability Protection Society  
Occupation: Chairman and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: 29865236  
Amount of Each Receipt this Period: 1100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gregory V. Ostergren

Mailing Address Corporate Centre  
1949 East Sunshine

City State Zip Code  
Springfield MO 65899-0001

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

Name of Employer: American National Property and Casualty  
Occupation: Chairman, President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: PR1456193321890  
Amount of Each Receipt this Period: 210.00  
P/R Deduction (\$210.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ms. June T. Holmes

Mailing Address 409 S. Vine

City State Zip Code  
Park Ridge IL 60068-4145

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

Name of Employer: PCI  
Occupation: Treasurer & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: PR1456336821890  
Amount of Each Receipt this Period: 255.00  
P/R Deduction (\$150.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1565.00

**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 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Joanne M. Orfanos	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 2104 Butternut Lane	<b>Transaction ID:</b> PR1456395521890
	City State Zip Code Northbrook IL 60062-6608	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer PCI Occupation Senior Vice President Membership	Aggregate Year-to-Date 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Bruce D Trost	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 13749 Bay Hill Court	<b>Transaction ID:</b> PR1456453321890
	City State Zip Code Clive IA 50325-8563	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$300.00 Monthly)
Name of Employer FBL Financial Group Occupation Executive Vice President	Aggregate Year-to-Date 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Scott A. Joyner	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 57 E. Delaware #2105	<b>Transaction ID:</b> PR1456541521890
	City State Zip Code Chicago IL 60611-1476	Amount of Each Receipt this Period 213.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$106.50 Semi-Monthly)
Name of Employer PCI Occupation Vice President	Aggregate Year-to-Date 1052.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>613.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 21 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven Wittmuss

Mailing Address 7410 Lambert Place

City State Zip Code  
Lincoln NE 68516-5813

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

Name of Employer Occupation  
FBL Financial Group Property Claims Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 333.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1456694621890

Amount of Each Receipt this Period  
83.34

P/R Deduction (\$83.34 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Ms. Susan G. Vincent

Mailing Address 1787 Sheffield

City State Zip Code  
Birmingham MI 48009-7224

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

Name of Employer Occupation  
Amerisure Companies Vice President & General Counsel

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1456707721890

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. David B. Hostetter

Mailing Address 37154 Weymouth

City State Zip Code  
Livonia MI 48152-4096

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

Name of Employer Occupation  
Amerisure Companies Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1456707921890

Amount of Each Receipt this Period  
50.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **233.34**

**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 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Don A. Smith	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 54021 Trent River Drive	<b>Transaction ID:</b> PR1456708221890
	City State Zip Code Shelby Township MI 48315-1438	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Amerisure Companies	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	P/R Deduction (\$35.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas E. Hoeg	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 17950 Cranbrook Court	<b>Transaction ID:</b> PR1456708421890
	City State Zip Code Northville MI 48167-4335	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Amerisure Companies	Occupation Executive Vice President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	P/R Deduction (\$50.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Roy D Kinnan	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 46139 Galway Drive	<b>Transaction ID:</b> PR1456708921890
	City State Zip Code Novi MI 48374-3972	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Amerisure Companies	Occupation Senior Vice President & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	P/R Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>220.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 35  
(check only one)

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

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

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

**A.**

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

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Vice President Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** PR1456719921890

Amount of Each Receipt this Period: 60.00

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

**B.**

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

Mailing Address 45000 Drocton

City Novi State MI Zip Code 48375-3802

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

Name of Employer Amerisure Companies Occupation Vice President Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.77

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** PR1456720621890

Amount of Each Receipt this Period: 80.00

P/R Deduction (\$40.00 Bi-Weekly)

**C.**

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

Mailing Address 47202 White Pines Drive

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** PR1456721821890

Amount of Each Receipt this Period: 70.00

P/R Deduction (\$35.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **210.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

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

Mailing Address 12955 E Mercer Lane

City State Zip Code  
Scottsdale AZ 85259-4416

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

Name of Employer Occupation  
FBL Financial Group Business Unit VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1456751421890

Amount of Each Receipt this Period  
83.34

P/R Deduction (\$83.34 Monthly)

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

Mailing Address 12135 Flambeau Drive

City State Zip Code  
Palos Heights IL 60463-1659

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

Name of Employer Occupation  
PCI Grassroots, Public Affairs Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1456768821890

Amount of Each Receipt this Period  
60.00

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

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

Mailing Address 14615 Tudor Chase Drive

City State Zip Code  
Tampa FL 33626-3338

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

Name of Employer Occupation  
Amerisure Companies Vice President & Regional Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR1566733121890

Amount of Each Receipt this Period  
50.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **193.34**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Mark F. Fox		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 29911 Robert		<b>Transaction ID:</b> PR1578285421890
	City Livonia	State MI	Zip Code 48150-3045
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
	Name of Employer Amerisure Companies	Occupation AVP Special Risk	P/R Deduction (\$30.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Ann W. Spragens		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 5510 Chase Avenue		<b>Transaction ID:</b> PR1632493221890
	City Downers Grove	State IL	Zip Code 60515-4268
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer PCI	Occupation Senior Vice President & Secretary	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Benjamin J. McKay		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 1401 South Joyce Street		<b>Transaction ID:</b> PR1695170221890
	City Arlington	State VA	Zip Code 22202-1874
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 208.34
	Name of Employer PCI	Occupation Sr. VP Federal Government Relations	P/R Deduction (\$104.17 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>368.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Thomas R. Litjen		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 3917 Barcroft Mews Court		<b>Transaction ID:</b> PR1790384221890
	City Falls Church	State VA	Zip Code 22041-1235
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 208.34
	Name of Employer PCI	Occupation VP Federal Government Relations	P/R Deduction (\$104.17 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Kurt D Gallinger		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 26777 Halsted Road		<b>Transaction ID:</b> PR2020349221890
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
	Name of Employer Amerisure Companies	Occupation Government Relation	P/R Deduction (\$60.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Debra Even		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 26777 Halsted		<b>Transaction ID:</b> PR2059592221890
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Amerisure Companies	Occupation Credit Manager	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>378.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 35  
(check only one)

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

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

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

**A.**

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

Mailing Address 905 48th Street

City State Zip Code  
West Des Moines IA 50265-7107

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

Name of Employer Occupation  
FBL Financial Group CFO and CAO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 409.11

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR2194739021890

Amount of Each Receipt this Period  
136.37

P/R Deduction (\$136.37 Monthly)

**B.**

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

Mailing Address 2435 Luckett Ave

City State Zip Code  
Vienna VA 22180-6819

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

Name of Employer Occupation  
PCI President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR2228336721890

Amount of Each Receipt this Period  
208.34

P/R Deduction (\$104.17 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Deirdre Manna

Mailing Address 1548 Maple Avenue

City State Zip Code  
Northbrook IL 60062-5475

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

Name of Employer Occupation  
PCI VP Industry and Regulatory Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** PR2247336321890

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **444.71**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 35  
(check only one)

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

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

**A.**

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

Mailing Address 4711 North Kenmore

City State Zip Code  
Chicago IL 60640-5980

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

Name of Employer Occupation  
PCI Sr Vice President, Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: PR2357924921890

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$150.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Kevin P Kelly

Mailing Address 3080 Eagandale Place

City State Zip Code  
Eagan MN 55121-2118

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

Name of Employer Occupation  
FBL Financial Group Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: PR2379663321890

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	30442.07

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

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

FOR LINE NUMBER: PAGE 29 / 35  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
EMC CO Political Action Committee

Mailing Address 717 Mulberry Street

City State Zip Code  
Des Moines IA 50309

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	3	/	2	0	0	9

**Transaction ID:** 29734363

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Farmers Mutual Hail PAC

Mailing Address 2323 Grand Avenue

City State Zip Code  
Des Moines IA 50312

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	0	9

**Transaction ID:** 29734596

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
GEICO PAC

Mailing Address Government Employees Ins. Co.  
1 Geico Plaza

City State Zip Code  
Washington DC 20076

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

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
0	4	/	1	4	/	2	0	0	9

**Transaction ID:** 29774160

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9500.00**

**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 30 / 35
	(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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Harleysville Insurance PAC-Federal

Mailing Address 355 Maple Avenue

City State Zip Code  
Harleysville PA 19438-2297

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2009

**Transaction ID: 29849900**

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
SECURA Insurance A Mutual Company PAC

Mailing Address 2401 S. Memorial Drive

City State Zip Code  
Appleton WI 54912

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID: 29865468**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>17000.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 35

<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

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

NAME OF COMMITTEE (In Full)

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

<b>A.</b>	Full Name (Last, First, Middle Initial) The Batchelder for Representative Committee  Mailing Address 105 W. Liberty Street  City Medina State OH Zip Code 44256  Purpose of Disbursement William Batchelder, STATE HOUSE 69th OH Candidate Name OH Rep. William Batchelder Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 69 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 29605780 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period  1000.00  William Batchelder, STATE HOUSE 69th OH
<b>B.</b>	Full Name (Last, First, Middle Initial) Friends of Joseph Scarnati  Mailing Address P. O. Box 792  City Harrisburg State PA Zip Code 17108  Purpose of Disbursement Joseph Scarnati, STATE SENATE 25th PA Candidate Name Senator Joseph Scarnati, III Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 29743887 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period  500.00  Joseph Scarnati, STATE SENATE 25th PA
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends of Don White  Mailing Address P. O. Box 792  City Harrisburg State PA Zip Code 17108  Purpose of Disbursement Donald White, STATE SENATE 41st PA Candidate Name Senator Donald White Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 29743897 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period  500.00  Donald White, STATE SENATE 41st PA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>2000.00</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 35

<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

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

NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)  
Republican Senate Campaign Committee

Mailing Address 211 South Fifth Street

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 29800118

Date of Disbursement

04 / 23 / 2009

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

3000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Friends Of Bill Posey

Mailing Address P. O. Box 360877

City Melbourne State FL Zip Code 32936

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Bill Posey

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: FL District: 15

Transaction ID: 29799269

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Geoff Davis for Congress

Mailing Address 700 12th Street NW  
Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. Geoffrey Davis

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: KY District: 04

Transaction ID: 29799270

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Friends Of Roy Blunt

Mailing Address PO Box 50100

City Springfield State MO Zip Code 65805

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Roy Blunt

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: MO District: 07

Transaction ID: 29799282

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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

NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Shelley Moore Capito for Congress

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339-1519

Purpose of Disbursement

Category/  
Type

Candidate Name  
Representa Shelley Capito

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: WV District: 02

Transaction ID: 29799285

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Donnelly for Congress

Mailing Address 499 South Capitol Street, SW  
Suite 404

City Washington State DC Zip Code 20003

Purpose of Disbursement

Category/  
Type

Candidate Name  
Joe Donnelly

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IN District: 02

Transaction ID: 29799298

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Montanans For Tester

Mailing Address PO Box 1135

City Helena State MT Zip Code 59624

Purpose of Disbursement

Category/  
Type

Candidate Name  
Sen. Jon Tester

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼

State: MT District:

Transaction ID: 29799400

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)

PAGE 35 / 35

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

AMERIPAC

Mailing Address 499 South Capitol St., SW-Ste. 414

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 29799401

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

1000.00