

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 05 01 2007 through 05 31 2007

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

Type or Print Name of Treasurer June Holmes

Signature of Treasurer Electronically Filed by June Holmes Date 06 20 2007

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

**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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		25814.36
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	25022.28									
(c) Total Receipts (from Line 19)	31367.74	167479.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	56390.02	193294.02								
7. Total Disbursements (from Line 31)	28050.00	164954.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28340.02	28340.02								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15996.53	92025.64
(i) Itemized (use Schedule A)	3364.98	21925.30
(ii) Unitemized	19361.51	113950.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	12000.00	53500.00
(c) Other Political Committees (such as PACs)	31361.51	167450.94
(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.)	6.23	28.72
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))	31367.74	167479.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31367.74	167479.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	25000.00	153750.00
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.....	3050.00	11204.00
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))..	28050.00	164954.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	28050.00	164954.00

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)	31361.51	167450.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31361.51	167450.94
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 33
	<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)

Full Name (Last, First, Middle Initial) A. Mr. Joseph Jordan		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 8308 Young Ct.		Transaction ID: 25895868
City Plano	State TX	Zip Code 75025-4322
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer GEICO Corporation	Occupation Assistant Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Douglas Todd Eden		Date of Receipt MM / DD / YYYY 05 / 07 / 2007
Mailing Address 423 N. Garfield Avenue		Transaction ID: 25899031
City Hinsdale	State IL	Zip Code 60521-3725
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Main Street America Group	Occupation SVP Field Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Joel Gelb		Date of Receipt MM / DD / YYYY 05 / 07 / 2007
Mailing Address 224 Clearwater Dr.		Transaction ID: 25899032
City Ponte Vedra Beach	State FL	Zip Code 32082-4167
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Main Street America Group	Occupation CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 33
	<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)
Barbara A Parker

Mailing Address 8034 Luckstone Drive

City State Zip Code
Dublin OH 43017-8584

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

Name of Employer Main Street America Group Occupation VP Personal Lines

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 5 / 0 8 / 2 0 0 7

Transaction ID: 25915888

Amount of Each Receipt this Period
300.00

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

Mailing Address 8622 Weaver Raod

City State Zip Code
Chittenango NY 13037

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

Name of Employer Main Street America Group Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: 25915889

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr William Anderson

Mailing Address 555 Sabastine Square

City State Zip Code
St. Augustine FL 34095

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

Name of Employer Main Street America Group Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: 25915890

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 33
	<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)

Full Name (Last, First, Middle Initial) A. Mr Joseph L Grauwiler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 10399 Cyress Lakes Drive		Transaction ID: 25915891	
City State Zip Code Jacksonville FL 32256-3645	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation Vice President Commercial Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mr. William C. McKenna		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 1854 Seminole Road		Transaction ID: 25915892	
City State Zip Code Atlantic Beach FL 32233-5916	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer National Grange Mutual Insurance Compa	Occupation Vice President Legal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms Antonia M. Porterfield		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 173 Barberrry Lane		Transaction ID: 25915893	
City State Zip Code Ponte Vedra Beach FL 32082-3000	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation Sr. VP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 33
	(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)

A. Full Name (Last, First, Middle Initial) Mr. Geoffrey S. Molina		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 222 Darling Road		Transaction ID: 25915894	
City State Zip Code Keene NH 03431-4942	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation Vice President - Internal Audit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mr Edward J Kuhl		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 638 Treehouse Circle		Transaction ID: 25915895	
City State Zip Code Saint Augustine FL 32095-6836	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation Sr. VP and CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. Henry J. Pippins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 2036 E. Clovelly Lane		Transaction ID: 25915896	
City State Zip Code Saint Augustine FL 32092-1093	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation V P Commercial Insurance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 33
	(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)

A. Full Name (Last, First, Middle Initial) Mr Kevin P. Kowar		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 9509 Stone Spring Drive		Transaction ID: 25915897	
City State Zip Code Mechanicsville VA 23116-5867	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America 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. Full Name (Last, First, Middle Initial) Susan E Mack		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 264 Royal Tern Road		Transaction ID: 25915898	
City State Zip Code Ponte Vedra Beach FL 32082-6275	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation SVP General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. Thomas M. Van Berkel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 24419 Moss Creek Lane		Transaction ID: 25915899	
City State Zip Code Ponte Vedra FL 32082-2163	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Main Street America Group	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 33
	(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)

Full Name (Last, First, Middle Initial) A. Mr. Michael D. Bower		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 259 La Casa Avae.		Transaction ID: 25915900	
City State Zip Code San Mateo CA 94403-5014	Amount of Each Receipt this Period 275.00		
FEC ID number of contributing federal political committee. C			
Name of Employer California Casualty Group	Occupation Controller & Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. Mr John R. Dedrick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address Box 39		Transaction ID: 25932572	
City State Zip Code Boca Grande FL 33921-0039	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Bend Mutual Group	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms Deborah A Beck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 9078 N Range Line Rd.		Transaction ID: 25934806	
City State Zip Code Milwaukee WI 53217-1010	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Bend Mutual Group	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 33
	(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)

A. Full Name (Last, First, Middle Initial)
Mr. Curt Culver

Mailing Address 4724 N Pinecrest Dr.

City State Zip Code
Nashotah WI 53058-9709

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

Name of Employer Mortgage Guaranty Insurance Corporation
Occupation Chairman and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 25934808

Amount of Each Receipt this Period
500.00

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

Mailing Address 14370 Hillside Road

City State Zip Code
Elm Grove WI 53122-1617

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

Name of Employer West Bend Mutual Group
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 25934809

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr Gordon H Gunnlaugsson

Mailing Address 31818 Muscovy Road

City State Zip Code
Hartland WI 53029-9707

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

Name of Employer West Bend Mutual Group
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 25934810

Amount of Each Receipt this Period
500.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Micheal D. Hayford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1806 Mountain Ave		Transaction ID: 25934811	
City State Zip Code Wauwatosa WI 53213-2336	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Bend Mutual Group	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr Peter D. Ziegler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 4363 Stoney Lane		Transaction ID: 25934812	
City State Zip Code Slinger WI 53086-9780	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Bend Mutual Group	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mr George E Prescott		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 806 Crestview Dr		Transaction ID: 25934813	
City State Zip Code West Bend WI 53095-4626	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Bend Mutual Group	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)

A. Full Name (Last, First, Middle Initial)
Mr. Steven D. Monahan

Mailing Address 3678 Lakeshore Dr.

City State Zip Code
Waterford MI 48329-2284

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

Name of Employer Occupation
Auto Club Group President and COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 25934814

Amount of Each Receipt this Period
1200.00

B. Full Name (Last, First, Middle Initial)
Steven T. Berry

Mailing Address 155 Town Hill Rd

City State Zip Code
New Hartford CT 06057-2013

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

Name of Employer Occupation
Main Street America Group Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 25974953

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Harry J. Dell

Mailing Address 2316 Hulett Avenue

City State Zip Code
Faribault MN 55021-2273

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

Name of Employer Occupation
Austin Mutual Insurance Company 1st Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 25974954

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 33
	<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. William B. Noll		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address P. O. Box 2865		Transaction ID: 25978140	
City State Zip Code Farmington Hills MI 48333-2865		Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GMAC Insurance Group President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

B. Full Name (Last, First, Middle Initial) Mr. Michael Lancashire		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 337 N. Sea Lake Lane		Transaction ID: 25978163	
City State Zip Code Ponte Vedra FL 32082-4756		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Main Street America Group Vice President Claims			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Mr. John M. Paule		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3500 Pommel Place		Transaction ID: 25998025	
City State Zip Code West Des Moines IA 50265-3195		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FBL Financial Group Chief Marketing Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 / 33
<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) Kathleen A. Gleeson Mailing Address 79 Marlin Road City State Zip Code Sandy Hook CT 06482-1360 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7 Transaction ID: 26002315 Amount of Each Receipt this Period 300.00
Name of Employer: Direct Response Group Occupation: V P Customer Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Danny A Collins Mailing Address 21 Somerset Drive City State Zip Code Avon CT 06001-3003 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7 Transaction ID: 26002316 Amount of Each Receipt this Period 300.00
Name of Employer: Direct Response Group Occupation: Vice President - Claims Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. John C. Lobert Mailing Address 1798 Brigs Court City State Zip Code Lisle IL 60532-4558 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1456226917131 Amount of Each Receipt this Period 312.51
Name of Employer: PCI Occupation: Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1041.70		P/R Deduction (\$104.17 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	912.51
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 / 33
<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) Ms. June T. Holmes Mailing Address 409 S. Vine City Park Ridge State IL Zip Code 60068-4145 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456336817131 Amount of Each Receipt this Period 315.00
Name of Employer PCI Occupation Treasurer & COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	P/R Deduction (\$105.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial) Ms. Joanne M. Orfanos Mailing Address 2104 Butternut Lane City Northbrook State IL Zip Code 60062-6608 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456395517131 Amount of Each Receipt this Period 150.00
Name of Employer PCI Occupation Senior Vice President Membership Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$50.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial) Mr. Joseph Annotti Mailing Address P.O. Box 44 City Glenview State IL Zip Code 60025-0044 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456534417131 Amount of Each Receipt this Period 150.00
Name of Employer PCI Occupation Senior Vice President Public Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	615.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 33
	<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)

Full Name (Last, First, Middle Initial) A. Mr. Donald Cleasby		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456536917131	
Mailing Address 2900 N. Burling St. #3S		Amount of Each Receipt this Period 75.00	
City Chicago State IL Zip Code 60657-5218	FEC ID number of contributing federal political committee. C		
Name of Employer PCI Occupation VP Regional Manager & Counsel	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.00 Semi-Monthly)		

Full Name (Last, First, Middle Initial) B. Mr. Scott A. Joyner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456541517131	
Mailing Address 57 E. Delaware #2105		Amount of Each Receipt this Period 313.00	
City Chicago State IL Zip Code 60611-1476	FEC ID number of contributing federal political committee. C		
Name of Employer PCI Occupation Vice President	Aggregate Year-to-Date ▼ 1013.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$106.50 Semi-Monthly)		

Full Name (Last, First, Middle Initial) C. Mr. D. Joseph Olson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456690417131	
Mailing Address 4401 Oak Pointe Drive		Amount of Each Receipt this Period 90.00	
City Brighton State MI Zip Code 48116-9790	FEC ID number of contributing federal political committee. C		
Name of Employer Amerisure Companies Occupation Senior Vice President & Counsel	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$45.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶	478.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 33
	<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. Thomas E. Hoeg		Date of Receipt
Mailing Address 17950 Cranbrook Court		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Northville MI 48167-4335		Transaction ID: PR1456708417131
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer Occupation Amerisure Companies Executive Vice President & COO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$50.00 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text"/> 500.00		

B. Full Name (Last, First, Middle Initial) Mr. Roy D Kinnan		Date of Receipt
Mailing Address 46139 Galway Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Novi MI 48374-3972		Transaction ID: PR1456708917131
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period
		<input type="text"/> 50.00
Name of Employer Occupation Amerisure Companies Senior Vice President & CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.00 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text"/> 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Derick Adams		Date of Receipt
Mailing Address 26777 Halsted Road		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Farmington Hills MI 48331-3577		Transaction ID: PR1456719917131
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period
		<input type="text"/> 60.00
Name of Employer Occupation Amerisure Companies Vice President Human Resources	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$30.00 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text"/> 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 210.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 33
	<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. Daniel J. Graf		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456720617131
Mailing Address 45000 Drocton		Amount of Each Receipt this Period 61.54
City State Zip Code Novi MI 48375-3802	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.77 Bi-Weekly)
Name of Employer Occupation Amerisure Companies Vice President Investments	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 307.70	

B. Full Name (Last, First, Middle Initial) Mr. Michael Dieterle		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456721817131
Mailing Address 47202 White Pines Drive		Amount of Each Receipt this Period 50.00
City State Zip Code Novi MI 48374-3697	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Occupation Amerisure Companies Vice President	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mr. Stephen W. Broadie		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456730417131
Mailing Address 480 Florian Drive		Amount of Each Receipt this Period 75.00
City State Zip Code Des Plaines IL 60016-5716	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Occupation PCI Vice President	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	186.54
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 33
	<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)

Full Name (Last, First, Middle Initial) A. Mr. Brett L. Clausen		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456751417131	
Mailing Address 12955 E Mercer Lane		Amount of Each Receipt this Period 111.12	
City State Zip Code Scottsdale AZ 85259-4416	FEC ID number of contributing federal political committee. C		P/R Deduction (\$111.12 Monthly)
Name of Employer Occupation FBL Financial Group Vice President Underwriting Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 222.24		

Full Name (Last, First, Middle Initial) B. Mr. Michael F. Gilhooly		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1456768817131	
Mailing Address 2600 River Road		Amount of Each Receipt this Period 90.00	
City State Zip Code Des Plaines IL 60018-3203	FEC ID number of contributing federal political committee. C		P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Occupation PCI Grassroots, Public Affairs Specialist	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. Gregory W. Heidrich		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1632197917131	
Mailing Address 49 Hawkins Circle		Amount of Each Receipt this Period 345.00	
City State Zip Code Wheaton IL 60187-8463	FEC ID number of contributing federal political committee. C		P/R Deduction (\$115.00 Semi-Monthly)
Name of Employer Occupation PCI Senior Vice President	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1150.00		

SUBTOTAL of Receipts This Page (optional) ▶	546.12
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 33
	<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) Ms. Ann W. Spragens Mailing Address 5510 Chase Avenue City Downers Grove State IL Zip Code 60515-4268 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1632493217131 Amount of Each Receipt this Period 150.00 P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer PCI Occupation Senior Vice President & Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr. Benjamin J. McKay Mailing Address 1401 South Joyce Street City Arlington State VA Zip Code 22202-1874 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1695170217131 Amount of Each Receipt this Period 312.51 P/R Deduction (\$104.17 Semi-Monthly)
Name of Employer PCI Occupation Sr. VP Federal Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.70	

C. Full Name (Last, First, Middle Initial) Mr Thomas R. Litjen Mailing Address 3917 Barcroft Mews Court City Falls Church State VA Zip Code 22041-1235 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1790384217131 Amount of Each Receipt this Period 312.51 P/R Deduction (\$104.17 Semi-Monthly)
Name of Employer PCI Occupation VP Federal Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.70	

SUBTOTAL of Receipts This Page (optional)	775.02
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 33
	<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) Ms Jona M. Van Deun Mailing Address 7040 34th Street City State Zip Code Berwyn IL 60402-3308 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1932745217131 Amount of Each Receipt this Period 90.00 P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Occupation PCI Senior Public Affairs Specialist Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mr. Kurt D Gallinger Mailing Address 26777 Halsted Road City State Zip Code Farmington Hills MI 48331-3577 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2020349217131 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Occupation Amerisure Companies Government Relation Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Ms. Margaret LaRuffa Mailing Address 26777 Halsted Road City State Zip Code Farmington Hills MI 48331-3577 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2020349417131 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Occupation Amerisure Companies AVP Human Resources Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	190.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 33
	<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) Debra Even Mailing Address 26777 Halsted City Farmington Hills State MI Zip Code 48331-3577 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2059592217131 Amount of Each Receipt this Period 50.00
Name of Employer Amerisure Companies Occupation Credit Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) Mr. Paul Kangas Mailing Address 444 N. Capitol St. NW Sutie 801 City Washington State DC Zip Code 20001-1512 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2127524017131 Amount of Each Receipt this Period 75.00
Name of Employer PCI Occupation Director, Federal Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$25.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial) James W Noyce Mailing Address 905 48th Street City West Des Moines State IA Zip Code 50265-7107 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2194739017131 Amount of Each Receipt this Period 133.34
Name of Employer FBL Financial Group Occupation Insurance Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.68	P/R Deduction (\$133.34 Monthly)

SUBTOTAL of Receipts This Page (optional)	258.34
TOTAL This Period (last page this line number only)	15996.53

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 33
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. GEICO PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address Government Employees Ins. Co. 1 Geico Plaza		Transaction ID: 25895869
City State Zip Code Washington DC 20076	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. EriePac		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 1699		Transaction ID: 25895899
City State Zip Code Erie PA 16530	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Farmers Mutual Hail PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 2323 Grand Avenue		Transaction ID: 25974958
City State Zip Code Des Moines IA 50312	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	12000.00

**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)

PAGE 26 / 33

<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)

Full Name (Last, First, Middle Initial)

A. Pomeroy for Congress

Mailing Address P.O. Box 746

City Bismark State ND Zip Code 58502

Purpose of Disbursement

011
Category/
Type

Candidate Name
Representative Earl Pomeroy

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ND District: 1

Transaction ID: 25882433

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Citizens for Gillmor

Mailing Address PO Box 910

City Port Clinton State OH Zip Code 43452-0910

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Paul Gillmor

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OH District: 5

Transaction ID: 25882429

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. The Freedom Project

Mailing Address 424 C Street, NE
Basement Unit

City Washington State DC Zip Code 20002

Purpose of Disbursement

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 25882431

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 33

<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)

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership Fund

Mailing Address 422 C Street, NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 25882432

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)

B. Roskam For Congress Committee

Mailing Address P.O. Box 713

City Wheaton State IL Zip Code 60189

Purpose of Disbursement

Candidate Name
Mr. Peter Roskam

Office Sought: House
 Senate
 President

State: IL District: 6

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 25882430

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)

C. Moore for Congress

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement

Candidate Name
Repr Dennis Moore

Office Sought: House
 Senate
 President

State: KS District: 3

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 25890670

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Debbie Wasserman-Schultz for Congress

Mailing Address 4479 Foxglove Ln

City Weston State FL Zip Code 33331

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Debbie Wasserman-Schultz

Office Sought: House Senate President
State: FL District: 20
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 25890672

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bachus for Congress

Mailing Address P O Box 59444

City Birmingham State AL Zip Code 35259-9444

Purpose of Disbursement

011
Category/
Type

Candidate Name
Representative Spencer Bachus, III

Office Sought: House Senate President
State: AL District: 6
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 25930498

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Cantor for Congress

Mailing Address 4914 Fitzhugh Ave Ste 202

City Richmond State VA Zip Code 23230

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Eric Cantor

Office Sought: House Senate President
State: VA District: 7
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 25930500

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Capuano for Congress Committee

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Michael Capuano

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: MA District: 8

Transaction ID: 25930501

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Cmte to Re-Elect Nydia M. Velazquez to Congress

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Nydia Velazquez

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: NY District: 12

Transaction ID: 25932051

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Jim Clyburn

Mailing Address 2725 Devine Street

City Columbia State SC Zip Code 29205

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr James Clyburn

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: SC District: 6

Transaction ID: 25930503

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. David Scott For Congress

Mailing Address 162 Hurt Street Ne

City Atlanta State GA Zip Code 30307

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. David Scott

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: GA District: 13

Transaction ID: 25975693

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of John Thune

Mailing Address 224 North Phillips Avenue Ste 210

City Sioux Falls State SD Zip Code 57104

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sen. John Thune

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: SD District: 2

Transaction ID: 25978969

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Reed Committee

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920-0628

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sena Jack Reed

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: RI District: 0

Transaction ID: 25975694

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 33

<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)

Full Name (Last, First, Middle Initial)

A. New Democrat Coalition PAC

Mailing Address 607 14th Street NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 25997076

Date of Disbursement

05 / 30 / 2007

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)

25000.00

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

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NAME OF COMMITTEE (In Full)

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

<p>A. Hoeven Committee</p> <p>Full Name (Last, First, Middle Initial) Hoeven Committee</p> <p>Mailing Address P. O. Box 952</p>		<p>Transaction ID: 25945636</p> <p>Date of Disbursement 05 / 16 / 2007</p>
<p>City Bismarck State ND Zip Code 58502</p>	<p>Purpose of Disbursement John Hoeven, GOVERNOR ND</p> <p>Candidate Name Gov John Hoeven</p>	<p>Amount of Each Disbursement this Period 500.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 011</p> <p>John Hoeven, GOVERNOR ND</p>

<p>B. ARV'07</p> <p>Full Name (Last, First, Middle Initial) ARV'07</p> <p>Mailing Address P. O. Box 154</p>		<p>Transaction ID: 25977004</p> <p>Date of Disbursement 05 / 22 / 2007</p>
<p>City Skillman State NJ Zip Code 08558</p>	<p>Purpose of Disbursement Alex DeCroce, STATE HOUSE 26th NJ</p> <p>Candidate Name Assemblymember Alex DeCroce</p>	<p>Amount of Each Disbursement this Period 1500.00</p>
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 26</p>	<p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 011</p> <p>Alex DeCroce, STATE HOUSE 26th NJ</p>

<p>C. Senate Republican Caucus</p> <p>Full Name (Last, First, Middle Initial) Senate Republican Caucus</p> <p>Mailing Address 2421 North 4th Street</p>		<p>Transaction ID: 25995551</p> <p>Date of Disbursement 05 / 29 / 2007</p>
<p>City Bismarck State ND Zip Code 58503</p>	<p>Purpose of Disbursement</p> <p>Candidate Name</p>	<p>Amount of Each Disbursement this Period 550.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 011</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2550.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 33 / 33

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. House Republican Caucus

Mailing Address c/o Nicole Weiler
526 Munich Drive

City Bismarck State ND Zip Code 58504

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 25995568

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

3050.00