

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) **ONE GEICO PLAZA**
Check if different than previously reported. (ACC) **WASHINGTON DC 20076**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00343749 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 07 01 2023 through / / 12 31 2023

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 **Crutchfield, Ryan, , ,**

Signature of Treasurer **Crutchfield, Ryan, , ,** Date / / 01 17 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		45104.52
(b) Cash on Hand at Beginning of Reporting Period.....	48763.02	
(c) Total Receipts (from Line 19)	2026.00	5684.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	50789.02	50789.02
7. Total Disbursements (from Line 31).....	- 1000.00	- 1000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	51789.02	51789.02
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07 / 01 / 2023 To: 12 / 31 / 2023

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1070.00	1735.00
(ii) Unitemized	956.00	3949.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2026.00	5684.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2026.00	5684.50
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2026.00	5684.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2026.00	5684.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	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.....	- 1000.00	- 1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	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)) ..	- 1000.00	- 1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	- 1000.00	- 1000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2026.00	5684.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2026.00	5684.50
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 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Hobart, Janice Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 Ramsey St
 City Alexandria State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.34676
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction \$10.00 biweekly

B. Hopkins, Lily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12962 Marcy Ranch Rd
 City Santa Ana State CA Zip Code 92705-2286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.30588
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction \$10.00 biweekly

C. Ingall, Seth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 Inglewood Ct
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 06 / 2023
Transaction ID : SA11AI.34685
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ingall, Seth, M., ,

Mailing Address 9308 Inglewood Ct

City Potomac	State MD	Zip Code 20854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) SVP
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2023
Transaction ID : SA11AI.34686

Amount of Each Receipt this Period
30.00

Memo Item
Payroll deduction \$30.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ingall, Seth, M., ,

Mailing Address 9308 Inglewood Ct

City Potomac	State MD	Zip Code 20854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) SVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2023
Transaction ID : SA11AI.34687

Amount of Each Receipt this Period
30.00

Memo Item
Payroll deduction \$30.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ingall, Seth, M., ,

Mailing Address 9308 Inglewood Ct

City Potomac	State MD	Zip Code 20854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) SVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2023
Transaction ID : SA11AI.34688

Amount of Each Receipt this Period
30.00

Memo Item
Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Ingall, Seth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 Inglewood Ct
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 08 / 31 / 2023
Transaction ID : SA11AI.34689
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

B. Ingall, Seth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 Inglewood Ct
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 14 / 2023
Transaction ID : SA11AI.34690
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

C. Ingall, Seth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 Inglewood Ct
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 28 / 2023
Transaction ID : SA11AI.34691
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
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 9 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Ingall, Seth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 Inglewood Ct
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.34692
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

B. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 06 / 2023
Transaction ID : SA11AI.34629
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

C. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 20 / 2023
Transaction ID : SA11AI.34630
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 10 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2023
Transaction ID : SA11AI.34631
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

B. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 17 / 2023
Transaction ID : SA11AI.34632
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

C. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2023
Transaction ID : SA11AI.34633
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 14 / 2023
Transaction ID : SA11AI.34634
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

B. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2023
Transaction ID : SA11AI.34635
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

C. Markel, Scott, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 Willard Ave
 Apt 501
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.34636
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	75.00
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 12 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 06 / 2023
Transaction ID : SA11AI.34613
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

B. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 20 / 2023
Transaction ID : SA11AI.34614
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

C. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 03 / 2023
Transaction ID : SA11AI.34615
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

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

90.00

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

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

FOR LINE NUMBER: PAGE 13 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 17 / 2023
Transaction ID : SA11AI.34616
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

B. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 08 / 31 / 2023
Transaction ID : SA11AI.34617
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

C. McKenzie, Gary, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Waters Edge Dr.
 City Lizella State GA Zip Code 31052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 14 / 2023
Transaction ID : SA11AI.34618
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
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 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McKenzie, Gary, L, ,

Mailing Address 159 Waters Edge Dr.

City Lizella State GA Zip Code 31052

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 28 / 2023
Transaction ID : SA11AI.34619

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll deduction \$30.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McKenzie, Gary, L, ,

Mailing Address 159 Waters Edge Dr.

City Lizella State GA Zip Code 31052

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 10 / 12 / 2023
Transaction ID : SA11AI.34620

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll deduction \$30.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. OKeefe, John, c, ,

Mailing Address 22642 Taylorstown Hunt Ct

City Ashburn State VA Zip Code 20148

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

Name of Employer (for Individual) GEICO Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 10 / 12 / 2023
Transaction ID : SA11AI.34604

Amount of Each Receipt this Period
 10.00

Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 15 OF 22
(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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Rinella, Angela, M, ,

Mailing Address 7544 John Hancock Dr

City Winter Garden State FL Zip Code 34787

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 07 / 06 / 2023
Transaction ID : SA11AI.34586

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll deduction \$20.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Rinella, Angela, M, ,

Mailing Address 7544 John Hancock Dr

City Winter Garden State FL Zip Code 34787

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 07 / 20 / 2023
Transaction ID : SA11AI.34587

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll deduction \$20.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Rinella, Angela, M, ,

Mailing Address 7544 John Hancock Dr

City Winter Garden State FL Zip Code 34787

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 08 / 03 / 2023
Transaction ID : SA11AI.34588

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 16 OF 22
(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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Rinella, Angela, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7544 John Hancock Dr

City Winter Garden	State FL	Zip Code 34787
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2023

Transaction ID : SA11AI.34589

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

B. Rinella, Angela, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7544 John Hancock Dr

City Winter Garden	State FL	Zip Code 34787
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2023

Transaction ID : SA11AI.34590

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

C. Rinella, Angela, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7544 John Hancock Dr

City Winter Garden	State FL	Zip Code 34787
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2023

Transaction ID : SA11AI.34591

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	60.00
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 17 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Rinella, Angela, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7544 John Hancock Dr
 City Winter Garden State FL Zip Code 34787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2023
Transaction ID : SA11AI.34592
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$20.00 biweekly

B. Rinella, Angela, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7544 John Hancock Dr
 City Winter Garden State FL Zip Code 34787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.34593
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll deduction \$20.00 biweekly

C. Shafner, Jonathan, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6108 Wayside Dr
 City North Bethesda State MD Zip Code 20852-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2023
Transaction ID : SA11AI.34576
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 50.00
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 18 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton State GA Zip Code 31024

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2023

Transaction ID : SA11AI.34560

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton State GA Zip Code 31024

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2023

Transaction ID : SA11AI.34561

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton State GA Zip Code 31024

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

Name of Employer (for Individual) GEICO Occupation (for Individual) RVP

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2023

Transaction ID : SA11AI.34562

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2023

Transaction ID : SA11AI.34563

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2023

Transaction ID : SA11AI.34565

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2023

Transaction ID : SA11AI.34566

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2023
Transaction ID : SA11AI.34567

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2023
Transaction ID : SA11AI.34568

Amount of Each Receipt this Period
20.00

Memo Item
Payroll deduction \$20.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tate, Frank, , ,

Mailing Address 306 Hassellwood Drive

City Cary	State NC	Zip Code 27518-3013
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2023
Transaction ID : SA11AI.34550

Amount of Each Receipt this Period
10.00

Memo Item
Payroll deduction \$10.00 biweekly

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 22
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
West, David, , ,

Mailing Address 6710 Poley Creek Dr W

City Lakeland	State FL	Zip Code 33811-2420
------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2023
Transaction ID : SA11AI.30422

Amount of Each Receipt this Period
10.00

Memo Item
Payroll deduction \$10.00 biweekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wolfe, Amy, M, ,

Mailing Address 11220 Chivalry Chase Ln

City Spotsylvania	State VA	Zip Code 22551
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2023
Transaction ID : SA11AI.34510

Amount of Each Receipt this Period
10.00

Memo Item
Payroll deduction \$10.00 biweekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	1070.00

**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"/> 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)

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. George Ducworth for Congress

Date of Disbursement

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

Mailing Address P.O. Box 870

City Anderson State SC Zip Code 29621

FEC Identification Number

C []

Transaction ID : SB23.34706

Amount of Each Disbursement this Period

[] - 500.00

Memo Item

Purpose of Disbursement

Voided check

[]

Candidate Name

George Ducworth for Congress

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. Maryland Republican Party

Date of Disbursement

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

Mailing Address 15 West Street

City Annapolis State MD Zip Code 21401

FEC Identification Number

C []

Transaction ID : SB23.30608

Amount of Each Disbursement this Period

[] - 500.00

Memo Item

Purpose of Disbursement

Voided check

[]

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

[] - 1000.00

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

[] - 1000.00