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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Selective Insurance Com	npany of America F	Political Action Comm	ittee
ADDRESS (number and street)	40 Wantage Ave		
Check if different			
than previously reported. (ACC)	Branchville		NJ 07890 –
2. FEC IDENTIFICATION NUM	BER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00550889		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report	o 20 (M2) May 20	(M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		r 20 (M3) <b>x</b> Jun 20 (	(Non-Election Year Only)
April 15 Quarterly Report (Q1)		7 20 (M4) Jul 20 (I	
July 15 Quarterly Report (Q2)	(c) 12-Day  PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE)	Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 05	01 2020		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of Beck, Jeffrey, , ,	f my knowledge and belief it	is true, correct and complete.
Signature of Traccurer Beck, Jej	ffrey, , ,	[Electronically Filed]	Date 06 03 2020
Signature of Treasurer		[Encironicumy Fueu]	Date 06 03 2020
NOTE: Submission of false, erroneou	us, or incomplete information	on may subject the person sign	ing this Report to the penalties of 52 U.S.C. § 30109
Office Use Only			FEC FORM 3X Rev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

#### Selective Insurance Company of America Political Action Committee

05 01 2020 05 31 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 54532.64 January 1, 2020 (b) Cash on Hand at 52157.15 Beginning of Reporting Period..... 2138.78 15763.29 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 70295.93 54295.93 6(a) and 6(c) for Column B)..... 9500.00 25500.00 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 44795.93 44795.93 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

Schedule C and/or Schedule D) .....

 Debts and Obligations Owed BY the Committee (Itemize all on

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

#### For further information contact:

0.00

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### Selective Insurance Company of America Political Action Committee

01 2020 05 31 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1842.32 10134.27 (i) Itemized (use Schedule A)..... 296.46 5629.02 (ii) Unitemized ..... (iii) TOTAL (add 15763.29 2138.78 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 15763.29 2138.78 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (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))....... 15763.29 2138.78 20. Total Federal Receipts 2138.78 15763.29 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)		Caroniaa Tour to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	0.00	
and Other Political Committees Independent Expenditures	6000.00	8500.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
<u>.                                      </u>	4 4	
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	4 1 4 1 4 1	1 1 1 1 1 1 1 1 1
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	2500.00
Other Disbursements (Including		
Non-Federal Donations)	3500.00	14500.00
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	0))	
(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
	45 45 45	3.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0500.00	25500.00
	9500.00	25500.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	9500.00	25500.00

#### **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)	2138.78	15763.29
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2138.78	13263.29
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

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

Use separate schedule(s) for each category of the

F	FOR LINE NUMBER:					PAGE	=	6	OF	22
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Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Adams, Charles, , , Date of Receipt Mailing Address 1275 Glenlivet Dr Ste 200 2020 City State Zip Code Transaction ID: 2020050819415-7 PA Allentown 18106 Amount of Each Receipt this Period FEC ID number of contributing C 23.08 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, Regional Manager Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 253.88 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Adams, Charles, , , Date of Receipt Mailing Address 1275 Glenlivet Dr 2020 Ste 200 City State Zip Code Transaction ID: 2020052219415-7 PA Allentown 18106 Amount of Each Receipt this Period FEC ID number of contributing 23.08 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Regional Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 253.88 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Albert, Shadi, , , Date of Receipt Mailing Address 40 Wantage Ave 22 2020 City Zip Code State Transaction ID: 2020052219415-65 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America EVP, Ins Strat & Bus Dev Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) 65.39 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s)

FOR LINE NUMBER:					PAGE		7	OF	22
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for each category of the Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Anderson, Allen, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020050819415-50 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, Chief UW Officer P/L Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 423.06 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Anderson, Allen, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020052219415-50 Branchville NJ 07890 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Chief UW Officer P/L Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 423.06 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Beal, Jamie, , , Date of Receipt Mailing Address 40 Wantage Ave 22 2020 City Zip Code State Transaction ID: 2020052219415-75 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Director of Communica Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 96.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE		8	OF	22		
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Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beck, Jeffrey, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020050819415-53 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 76.92 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, Govt & Regulatory Af Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 846.12 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Beck, Jeffrey, , , Date of Receipt Mailing Address 40 Wantage Ave 05 2020 City State Zip Code Transaction ID: 2020052219415-53 Branchville NJ 07890 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Govt & Regulatory Af Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 846.12 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bennett, Cyndi, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-51 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Compensation & Benefi Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 173.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bresney, John, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-34 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP, Chief Information Of Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chakravarthi, Sarita, , , Date of Receipt Mailing Address 40 Wantage Ave 05 2020 City State Zip Code Transaction ID: 2020050819415-52 Branchville NJ 07890 Amount of Each Receipt this Period FEC ID number of contributing 23.08 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Tax & Asst Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 253.88 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Chakravarthi, Sarita, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-52 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 23.08 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Tax & Asst Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 253.88 Other (specify) 65.39 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

22 FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Clark, Thomas, , , Date of Receipt Mailing Address 7401 Beaufont Springs Dr Ste 400 2020 City Zip Code State Transaction ID: 2020050819415-58 VA North Chesterfield 23225 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, Claims General Couns Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Clark, Thomas, , , Date of Receipt Mailing Address 7401 Beaufont Springs Dr 2020 Ste 400 City State Zip Code Transaction ID: 2020052219415-58 North Chesterfield VA 23225 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Claims General Couns Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Eppers, Joseph, , , Date of Receipt Mailing Address 10 Waterside Dr 22 2020 Ste 306 City State Zip Code Transaction ID: 2020052219415-73 CT Farmington 06032 Amount of Each Receipt this Period FEC ID number of contributing C 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America Chief Investment Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) 119.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

F	FOR LINE NUMBER:					PAGE	•	11	OF	22
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Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gaudet, Gordon, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020050819415-66 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Innovation Officer Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gaudet, Gordon, , , Date of Receipt Mailing Address 40 Wantage Ave 05 2020 City State Zip Code Transaction ID: 2020052219415-66 Branchville NJ 07890 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America Chief Innovation Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1100.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hall, Brenda, , , Date of Receipt Mailing Address 3426 Toringdon Way 80 2020 Ste 200 City State Zip Code Transaction ID: 2020050819415-22 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America EVP, C/L Chief Operat Off Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Brenda, , , Date of Receipt Mailing Address 3426 Toringdon Way Ste 200 2020 City State Zip Code Transaction ID: 2020052219415-22 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP, C/L Chief Operat Off Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Harris, Christie, , , Date of Receipt Mailing Address 3426 Toringdon Way 2020 Ste 200 City State Zip Code Transaction ID: 2020050819415-68 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Claims LOB Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Harris, Christie, , , Date of Receipt Mailing Address 3426 Toringdon Way 22 2020 Ste 200 City State Zip Code Transaction ID: 2020052219415-68 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Claims LOB Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 160.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hollander, Martin, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-72 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, Chief Audit Executiv Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kikkert, Bonnie, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020052219415-5 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Claims Operations & A Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lanza, Michael, , , Date of Receipt Mailing Address 40 Wantage Ave 80 2020 City Zip Code State Transaction ID: 2020050819415-46 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP, General Counsel Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 139.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lanza, Michael, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-46 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP, General Counsel Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lewis, Carlos, , , Date of Receipt Mailing Address 3426 Toringdon Way 2020 Ste 200 City State Zip Code Transaction ID: 2020052219415-85 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Reg Claims Operations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lucas, Michael, , , Date of Receipt Mailing Address 900 E 96th St 22 2020 Ste 400 City State Zip Code Transaction ID: 2020052219415-80 IN Indianapolis 46240 Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) 139.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Macmullin, Michael, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-38 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP, Small Business Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mazzarella, Michael, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020050819415-31 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Commercial LOB Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mazzarella, Michael, , , Date of Receipt Mailing Address 40 Wantage Ave 22 2020 City Zip Code State Transaction ID: 2020052219415-31 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Commercial LOB Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McKenna, Robert, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020050819415-45 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP Enterprise Arch & Inf Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McKenna, Robert, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020052219415-45 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP Enterprise Arch & Inf Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 440.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Oosten, Melinda, , , Date of Receipt Mailing Address 40 Wantage Ave 80 2020 City Zip Code State Transaction ID: 2020050819415-62 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America VP, Personal Lines Pricin Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Oosten, Melinda, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-62 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP, Personal Lines Pricin Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Orecchio, Maria, , , Date of Receipt Mailing Address 40 Wantage Ave 05 2020 City State Zip Code Transaction ID: 2020050819415-70 Branchville NJ 07890 Amount of Each Receipt this Period FEC ID number of contributing 76.93 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Deputy General Couns Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 846.23 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Orecchio, Maria, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-70 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 76.93 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Deputy General Couns Receipt For: Aggregate Year-to-Date ▼ Primary General 846.23 Other (specify) 178.86 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Patrickio, Joseph,,, Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-76 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP, Infrastructure Eng. Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Purnell, Thomas, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020050819415-30 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Regional Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Purnell, Thomas, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020052219415-30 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America SVP, Regional Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 69.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 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) Selective Insurance Company of America Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sarisky, Brian, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City Zip Code State Transaction ID: 2020050819415-10 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief UW Officer, CL Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sarisky, Brian, , , Date of Receipt Mailing Address 40 Wantage Ave 2020 City State Zip Code Transaction ID: 2020052219415-10 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America Chief UW Officer, CL Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Senia, Vincent, , , Date of Receipt Mailing Address 40 Wantage Ave 80 2020 City Zip Code State Transaction ID: 2020050819415-60 NJ Branchville 07890 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Selective Insurance Company of America EVP, Chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	NAME OF COMMITTEE (In Full)  Selective Insurance Company o	f America I	Political Action Commi	ttee
Α.	Full Name of Individual (Last, First, Middle Init Senia, Vincent, , ,  Mailing Address 40 Wantage Ave	ial) or Full Orga	anization Name	Date of Receipt
	City Branchville	State NJ	Zip Code 07890	05 22 2020  Transaction ID : 2020052219415-60  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer (for Individual)  Selective Insurance Company of America  Receipt For:  Primary  General  Other (specify)		ation (for Individual) Chief Actuary ar-to-Date ▼  550.00	Memo Item
В.	Full Name of Individual (Last, First, Middle Init Mailing Address	ial) or Full Orga	anization Name	Date of Receipt
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼	
<del>С</del> .	Full Name of Individual (Last, First, Middle Init	ial) or Full Orga	anization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼	
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Т	OTAL This Period (last page this line number of	only)	<b>•</b>	1842.32

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 21 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 28a	22 <b>x</b> 23 26 27 28b 28c 29 30b
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or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
> Selective Insurance Company of A	merica Political Acti	on Commit	ttee
/ Full Name (Last, First, Middle Initial)			
A. Josh Gottheimer For Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 584			05 19 2020
City	State Zip Code		
Ridgewood	NJ 07451		FEC Identification Number
Purpose of Disbursement 2020 General		Tau'	C C00573949
Candidate Name		011	Transaction ID : 48A213E1F7I
Gottheimer, Joshua, S., ,		Category/ Type	Amount of Each Disbursement this Period
	nent For: 2020	1,700	2500.00
Senate	Primary <b>X</b> General		
	Other (specify) ▼		Memo Item
State: NJ District: 05  Full Name (Last, First, Middle Initial)			_
B. Josh Gottheimer For Congress			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 584			05 19 2020
,	State Zip Code		FEC Identification Number
Ridgewood Purpose of Disbursement	NJ 07451		C 0005770040
2020 Primary		011	C C00573949
Candidate Name		Category/	Transaction ID: 58DBFFC67C  Amount of Each Disbursement this Period
Gottheimer, Joshua, S., ,		Туре	******
	nent For: 2020		2500.00
	Primary General Other (specify)		
State: NJ District: 05			Memo Item
Full Name (Last, First, Middle Initial)			
C. McConnell Senate Committee			Date of Disbursement
Mailing Address PO Box 1496			05 14 2020
,	State Zip Code KY 40201		FEC Identification Number
Louisville Purpose of Disbursement	KY 40201		C C00193342
2020 Primary		011	Transaction ID : 51C5DF286B
Candidate Name		Category/	Amount of Each Disbursement this Period
McConnell, Mitch, , ,  Office Sought: House Disbursen	nent For: 2020	Туре	1000.00
	Primary General		100.00
	Other (specify) ▼		Memo Item
State: KY District:			I Mellio Relli
OUDTOTAL of Dist			6000.00
SUBTOTAL of Disbursements This Page (optional)		·····	0000.00
TOTAL This Period (last page this line number only)			6000.00

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r 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)  Selective Insurance Company of America Political Action Committee  Full Name (Last, First, Middle Initial)  Insurance Political Action Committee (State Account)  Mailing Address 115 W. Washington Street  City  Indianapolis  In Major Category  Transaction ID: 1885A98A8:  Amount of Each Disbursement North Primary  Persident  Office Sought: House  Disbursement  Candidate Name  City  State  Disbursement  City  State  Disbursement  Candidate Name  City  Purpose of Disbursement  Candidate Name  City  State  Disbursement  Candidate Name  Category  Type  Office Sought: House  Disbursement  Candidate Name  Category  Type  Office Sought: House  Disbursement  Candidate Name  City  State  Disbursement  Candidate Name  Category  Type  Office Sought: House  Disbursement  Candidate Name  Category  Type  Office Sought: House  Disbursement  Candidate Name  Category  Type  T	TEMIZED DISBURSEMENTS	for each category of the	21b	22 23 26 27
NAME OF COMMITTEE (in Full)  Selective Insurance Company of America Political Action Committee  Full Name (Last, First, Middle Initial)  Insurance Political Action Committee (State Account)  Mailing Address 115 W. Washington Street  City Indianapolis Prupose of Disbursement Nonfoderal Contribution  Cardidate Name  Office Sought: House President Disbursement For: Senate Primary General Other (specify)  Wemo Item  Date of Disbursement this Peric  Transaction ID: 1885A9BAB: Amount of Each Disbursement this Peric  Transaction ID: 1885A9BAB: Amount of Each Disbursement this Peric  Transaction ID: 1885A9BAB: Amount of Each Disbursement this Peric  Transaction ID: 1885A9BAB: Amount of Each Disbursement this Peric  Category Type  Office Sought: House Senate President Other (specify)  Office Sought: House Senate President Other (specify)  Disbursement  Cardidate Name  Office Sought: House Senate President Other (specify)  Office Sought: House Senate Primary General Other (specify)  Date of Disbursement  Category Type  Disbursement  Date of Disbursement this Peric  Category Type  Amount of Each Disbursement this Peric  Category Type  Office Sought: House Senate Primary General Other (specify)  Technication Number  Category Amount of Each Disbursement this Peric  Category Type  Office Sought: House Senate Primary General Other (specify)  Mailing Address  City  State Disbursement  Technication Number  Category Amount of Each Disbursement this Peric  Amount of Each Disburse				
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Insurance Political Action Committee (State Account)  Mailing Address 115 W. Washington Street  City		merica Political Acti	on Commit	tee
Mailing Address   15 W. Washington Street   State   Zip Code   House   Disbursement House   Disbursement House   Disbursement   Date of Disbursement   Disbursement   Date of Disbursement   Disbursement   Date of Disbursement	,	(0)		Data of Diahuranant
City Indianapolis Purpose of Disbursement Nonfederal Contribution Candidate Name Condidate Name	- <del></del>			M = M / D = D / Y = Y = Y
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Category/ Type  Office Sought: House Senate Primary General  Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Mailing Address  City State Zip Code  Primary General Other (specify)  Date of Disbursement this Peric Senate Primary General Other (specify)  Memo Item  FEC Identification Number  C Amount of Each Disbursement this Peric Senate Primary General Other (specify)  Date of Disbursement For:  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  Office Sought: House President Other (specify) ▼  State: District: Other (specify) ▼  Memo Item  Subtotal of Disbursement This Page (optional)			011	
Office Sought:	Candidate Name			Amount of Each Disbursement this Period
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Date of Disbursement  Mailing Address  City  State  Zip Code  Purpose of Disbursement  Candidate Name  Office Sought:  President  President  District:  Full Name (Last, First, Middle Initial)  City  State  Disbursement  State  Disbursement  Date of Disbursement this Peric  Category/ Type  Memo Item  Date of Disbursement  Category/ Type  Memo Item  FEC Identification Number  Category/ Type  Category/ Type  Office Sought:  House  Senate  Primary  Office Sought:  House  Senate  Primary  Office Sought:  Disbursement For:  Senate  Primary  Other (specify)  Memo Item  Subtrotal of Disbursement this Peric  Memo Item  Subtrotal of Disbursement This Page (optional)		Other (specify) ▼		Memo Item
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Purpose of Disbursement  Candidate Name  City  Purpose of Disbursement  City  State  City  Amount of Each Disbursement this Peric  Category/ Type  Category/ Type  Memo Item  Subtrotal of Disbursement This Page (optional)  Memo Item  Subtrotal of Disbursements This Page (optional)  Amount of Each Disbursement this Peric  Memo Item  Subtrotal of Disbursements This Page (optional)	Mailing Address			M = M / D = D / Y = Y = Y = Y
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Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code FEC Identification Number  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Office Sought: House Senate Primary General Other (specify)  State: District:  State: Disbursement For: General Other (specify)   State: District: Memo Item  State: Senate Primary General Other (specify)   State: State: District: Memo Item	Candidate Name			Amount of Each Disbursement this Period
State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  City  State  City  State  City  State  Candidate Name  Candidate Name  Office Sought:  Senate  President  State:  District:  Date of Disbursement  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item  State:  State:  District:  Memo Item  3500.00				
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City				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  State: District:  Substrict: Memo Item  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Memo Item  3500.00	Mailing Address			
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Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  Subtrotal of Disbursements This Page (optional)	Candidate Name		Category/ Type	Amount of Each Disbursement this Period
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State: District:  SUBTOTAL of Disbursements This Page (optional)		•		
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