

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)

2600 South River Road

☐Check if different  
than previously  
reported. (ACC)

Des Plaines

IL

60018

3286

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00066472

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2006

through

05

31

2006

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

Type or Print Name of Treasurer

June Holmes

Signature of Treasurer

Electronically Filed by June Holmes

Date

06

19

2006

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		158339.20
(b) Cash on Hand at Beginning of Reporting Period .....	90522.12	
(c) Total Receipts (from Line 19) .....	42079.79	107762.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	132601.91	266101.91
7. Total Disbursements (from Line 31) .....	54500.00	188000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	78101.91	78101.91
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	6

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	34644.44	72171.70
(i) Itemized (use Schedule A) .....	5400.00	15265.00
(ii) Unitemized .....	40044.44	87436.70
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	2000.00	20000.00
(c) Other Political Committees (such as PACs) .....	42044.44	107436.70
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	35.35	326.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	42079.79	107762.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	42079.79	107762.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(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.....		52000.00	175500.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		2500.00	12500.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		54500.00	188000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		54500.00	188000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	42044.44	107436.70
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42044.44	107436.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 40

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

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

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

Mailing Address 717 Mulberry Street

City State Zip Code  
Des Moines IA 50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23935229

Amount of Each Receipt this Period

2000.00

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

2000.00

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

2000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms Deborah A Beck Mailing Address 9078 N Range Line Rd. City Milwaukee State WI Zip Code 53217-1010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer West Bend Mutual Group Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6 <b>Transaction ID: 23935478</b> Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms Carolyn S. Gilb Mailing Address 16432 Parkside Drive City Parker State CO Zip Code 80134-9561 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Company Occupation Colorado South Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6 <b>Transaction ID: 23960839</b> Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Patrick W. Maloney Mailing Address 5717 Kilkenny Place City Fitchburg State WI Zip Code 53711-6965 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Company Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6 <b>Transaction ID: 23960840</b> Amount of Each Receipt this Period 300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cassandra R. Stiff  
Mailing Address 6514 Caddies Way

City State Zip Code  
Mason OH 45040-5668

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Family Insurance  
Group

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960841

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James W. Noyce  
Mailing Address 905 48th Street

City State Zip Code  
West Des Moines IA 50265-7107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FBL Financial Group

Occupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960843

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William J. Oddy  
Mailing Address 2526 River Bye Road

City State Zip Code  
Adel IA 50003-8010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FBL Financial Group

Occupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960845

Amount of Each Receipt this Period

2500.00

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

3100.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Sheila Link

Mailing Address 6131 Blue Circle Dr.

City

Eden Prairie

State

MN

Zip Code

55343-9108

FEC ID number of contributing federal political committee.

C

Name of Employer  
American Family Insurance Group

Occupation

Sales Director - MN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960956

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mr. Steven Wittmuss

Mailing Address 7410 Lambert Place

City

Lincoln

State

NE

Zip Code

68516-5813

FEC ID number of contributing federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation

Property Claims Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960957

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Christopher Listau

Mailing Address 1082 South 46th Street

City

West Des Moines

State

IA

Zip Code

50265-5239

FEC ID number of contributing federal political committee.

C

Name of Employer  
American Family Insurance Group

Occupation

State Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960958

Amount of Each Receipt this Period

300.00

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

900.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)  
Mr. Anthony G. Dickson

Mailing Address 408 Ramsey Road

City State Zip Code  
 Yardley PA 19067-4629

FEC ID number of contributing federal political committee.

C

Name of Employer  
New Jersey Manufacturers Insurance ComOccupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 6

Transaction ID: 23960959

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)  
Mr. Robert D. Quesnel

Mailing Address 22265 SW Chilkat Ter.

City State Zip Code  
 Tualatin OR 97062-9075

FEC ID number of contributing federal political committee.

C

Name of Employer  
American Family Insurance GroupOccupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: 23960988

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)  
Britt StenderMailing Address 550 Polaris Parkway  
Suite 100

City State Zip Code  
 Westerville OH 43082-7045

FEC ID number of contributing federal political committee.

C

Name of Employer  
American Family Insurance GroupOccupation  
State Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: 23960989

Amount of Each Receipt this Period

300.00

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

5600.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John W. Thedinga Mailing Address 10308 Canyon Valley Avenue City State Zip Code Las Vegas NV 89145-8818 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Group Occupation Nevada Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID: 23960990</b> Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. David N. Carter Mailing Address 4505 Austin Point Ct. City State Zip Code Saint Charles MO 63304-0331 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Group Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID: 23983102</b> Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Jack A. Daigle Mailing Address 1300 SW Arrowhead Road City State Zip Code Topeka KS 66604-4023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Company Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID: 23983104</b> Amount of Each Receipt this Period 300.00

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

900.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Robert C. Toney

Mailing Address 35903 SE Kaleetan Lp

City State Zip Code  
 Snoqualmie WA 98065-8702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Insurance  
Group

Occupation  
Director of Sales, Washington

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 6

Transaction ID: 23983105

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Mr. Ryan H. Powell

Mailing Address P.O. Box 1

City State Zip Code  
 Sioux Falls SD 57101-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Insurance  
Group

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: 23983293

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Ms Tammy Montagna

Mailing Address 4501 Sterling Road  
Suite 105

City State Zip Code  
 Peoria IL 61615-3834

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Insurance  
Group

Occupation  
State Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: 23983294

Amount of Each Receipt this Period

600.00

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

1200.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 40

(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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr Gordon H Gunnlaugsson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 31818 Muscovy Road		<b>Transaction ID:</b> 23983295
City Hartland	State WI	Zip Code 53029-9707
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer West Bend Mutual Group	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dale J. Kent		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address N90W20886 Scenic Drive		<b>Transaction ID:</b> 23983298
City Menomonee Falls	State WI	Zip Code 53051-1117
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer West Bend Mutual Group	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. W. Neal Menefee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 1165 Nelson Drive		<b>Transaction ID:</b> 23983314
City Harrisonburg	State VA	Zip Code 22801-3503
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Rockingham Mutual Insurance Company	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

1100.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Ms Rachelle Burton

Mailing Address Rt 1 Box 64

City State Zip Code  
 Matfield Green KS 66862-9713

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 American Family Insurance Group

Occupation  
 Midland West Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983394

Amount of Each Receipt this Period

300.00

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

Mr. Gary P. Flynn

Mailing Address 225 N. 45th Street

City State Zip Code  
 Phoenix AZ 85034-1901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 American Family Insurance Group

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983395

Amount of Each Receipt this Period

300.00

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

Mr. Michael L. Quesnel

Mailing Address 2423 Albion Avenue

City State Zip Code  
 Fairmont MN 56031-3302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 American Family Insurance Group

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983396

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John D. Blackburn Mailing Address 20 Pinehurst Road City Lincoln State IL Zip Code 62656-9100 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer COUNTRY Insurance and Financial Service Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 <b>Transaction ID: 23983397</b> Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. William L. Bingle Mailing Address 4185 Briarwood NW City Salem State OR Zip Code 97304-9541 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Oregon Mutual Group Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 <b>Transaction ID: 23983525</b> Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr Charles S. Katter Mailing Address 5017 S W Robert Court City Portland State OR Zip Code 97219-3339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Oregon Mutual Group Occupation Vice President-Claims Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 <b>Transaction ID: 23983526</b> Amount of Each Receipt this Period 300.00

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

**3100.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Mr. Richard B. Prouser

Mailing Address 5875 Bay Point Drive

City State Zip Code  
 Lake Oswego OR 97035-6786

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Oregon Mutual Group

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983527

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Brian M. Steffel

Mailing Address 2545 Foxhaven Dr. SE

City State Zip Code  
 Salem OR 97306-1011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Oregon Mutual Group

Occupation  
Asst. Vice President - Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983528

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Edward J. Yorty

Mailing Address 10770 S.W. Willow Street

City State Zip Code  
 Tualatin OR 97062-8056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Oregon Mutual Group

Occupation  
Vice President Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983529

Amount of Each Receipt this Period

300.00

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

900.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gladys A. Keith Mailing Address 6301 James A Reed Road City State Zip Code Kansas City MO 64133-4775 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Group Occupation State Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 09 / 2006 <b>Transaction ID: 23983530</b> Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Gary M. Schraufnagel Mailing Address 9510 Meridian Blvd. City State Zip Code Englewood CO 80112-5925 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Family Insurance Group Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 09 / 2006 <b>Transaction ID: 23983531</b> Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. R. Kirk Lindsey Mailing Address P. O. Box 726 City State Zip Code Riverbank CA 95367-0726 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer California Casualty Management Company Occupation Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 09 / 2006 <b>Transaction ID: 23983532</b> Amount of Each Receipt this Period 250.00

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Mr. August P. Alegi

Mailing Address 500 South Broad Street

City State Zip Code  
 Meriden CT 06450-6643

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Direct Response Group

Occupation  
Vice President and General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983534

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Mr George E Prescott

Mailing Address 806 Crestview Dr

City State Zip Code  
 West Bend WI 53095-4626

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
West Bend Mutual Group

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 23983535

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mr. James P. Brannen

Mailing Address 3329 Waterberry Circle

City State Zip Code  
 Waukegan IA 50263-8151

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FBL Financial Group

Occupation  
Vice President Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: 23995206

Amount of Each Receipt this Period

300.00

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Jeffrey A. Lewis

Mailing Address 4718 148th Street

City State Zip Code  
 Urbandale IA 50323-2074

FEC ID number of contributing federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation  
Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: 23995210

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Mr. Leo M. Orth, Jr.

Mailing Address 14614 Wilden Drive

City State Zip Code  
 Urbandale IA 50323-2070

FEC ID number of contributing federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation  
Vice President Research & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: 23995213

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Mr. Scott Shuck

Mailing Address 27 Northwoods

City State Zip Code  
 Adel IA 50003-9750

FEC ID number of contributing federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation  
Vice President - Marketing Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: 23995216

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Mr. Brett L. Clausen

Mailing Address 3712 144th Street

City State Zip Code  
 Urbandale IA 50323-2049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation  
Vice President Underwriting Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 6

Transaction ID: 23995275

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Mr. Steve Nelson

Mailing Address 4830 Birch Hollow Drive

City State Zip Code  
 Lincoln NE 68516-3382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FBL Financial Group

Occupation  
Business Center Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 6

Transaction ID: 23995277

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Mr. Douglas A. Stimeling

Mailing Address 2073 Wild Dunes Court

City State Zip Code  
 Geneva IL 60134-4315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Insurance  
Group

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: 23995603

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Cyrus S. Winters

Mailing Address 524 53rd Place

City State Zip Code  
West Des Moines IA 50266-7255

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FBL Financial Group

Occupation  
Vice President-Agency & Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
05 18 2006

Transaction ID: 24043451

Amount of Each Receipt this Period

240.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Konopka

Mailing Address 4186 Governor Yeardley Lane

City State Zip Code  
Fairfax VA 22030-8115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Medmarc Insurance Group

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 18 2006

Transaction ID: 24043452

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
William H. Stander

Mailing Address 1786 Vineyard Way

City State Zip Code  
Tallahassee FL 32317-7913

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PCI

Occupation  
Asst. Vice President & Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 18 2006

Transaction ID: 24043453

Amount of Each Receipt this Period

300.00

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

840.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth A. Bergquist		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 6340 South 3000 East Suite 400		<b>Transaction ID:</b> 24047524	
City State Zip Code Salt Lake City UT 84121-3540	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Family Insurance Group	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Moore		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2521 River Bye Road P.O. Box 5		<b>Transaction ID:</b> 24047527	
City State Zip Code Adel IA 50003-8010	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer FBL Financial Group	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. John M. Paule		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3500 Pommel Place		<b>Transaction ID:</b> 24047528	
City State Zip Code West Des Moines IA 50265-3195	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer FBL Financial Group	Occupation Chief Marketing Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms Susan K Cotter			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 10620 Sweetbriar Parkway			<b>Transaction ID:</b> 24049733	
City State Zip Code Silver Spring MD 20903-1239			Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PCI		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Susan M. Miller			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1421 S. Linden			<b>Transaction ID:</b> 24049734	
City State Zip Code Park Ridge IL 60068-5545			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PCI		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Samuel Sorich, Esq			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 3843 Langdon Court			<b>Transaction ID:</b> 24049735	
City State Zip Code El Dorado Hills CA 95762-4332			Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PCI		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00		

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

2200.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Mr. Mark B. Steen

Mailing Address 15466 Meherrin Drive

City State Zip Code  
 Centreville VA 20120-3710

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 Medmarc Insurance Group

Occupation  
 Assistant Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049739

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Lisa C. Hargis

Mailing Address 3310 Knighton Way

City State Zip Code  
 Forest Grove OR 97116-1032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 Oregon Mutual Group

Occupation  
 Vice President Personal Lines

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049741

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Mr Jonathan A. Brown

Mailing Address 9053 Tarmac Way

City State Zip Code  
 Fair Oaks CA 95628-8144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 California Casualty Group

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049742

Amount of Each Receipt this Period

350.00

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

950.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dennis M. Marker  
Mailing Address 14906 Sheridan Circle

City State Zip Code  
Clive IA 50325-4523

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FBL Financial Group

Occupation  
VP Inv. Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049744

Amount of Each Receipt this Period

240.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brian R. Wilkin  
Mailing Address 97 Lamberts Lane

City State Zip Code  
Cohasset MA 02025-1213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Hingham Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049756

Amount of Each Receipt this Period

1200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Andrew S. Frazier  
Mailing Address 23 Sherwood Downs

City State Zip Code  
Park Ridge NJ 07656-2603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Western World Insurance Group

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: 24049765

Amount of Each Receipt this Period

3750.00

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

5190.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert Joyce  
Mailing Address 6478 Foxglove Drive

City State Zip Code  
Medina OH 44256-7861

FEC ID number of contributing federal political committee.

C

Name of Employer  
Westfield GroupOccupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: 24097145

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Bernadette Rouse  
Mailing Address 1006 S. Crescent

City State Zip Code  
Park Ridge IL 60068-4844

FEC ID number of contributing federal political committee.

C

Name of Employer  
PCIOccupation  
Assistant Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: 24097146

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John C. Lobert  
Mailing Address 1798 Brigs Court

City State Zip Code  
Lisle IL 60532-4558

FEC ID number of contributing federal political committee.

C

Name of Employer  
PCIOccupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.70

Date of Receipt

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

Transaction ID: PR1456226914189

Amount of Each Receipt this Period

244.44

P/R Deduction (\$122.22 Semi-Monthly)

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

1544.44

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

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

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

FOR LINE NUMBER: PAGE 27 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. June T. Holmes Mailing Address 409 S. Vine City Park Ridge State IL Zip Code 60068-4145 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PCI Occupation Treasurer & COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1456336814189 Amount of Each Receipt this Period 210.00 P/R Deduction (\$105.00 Semi-Monthly)
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joanne M. Orfanos Mailing Address 2104 Butternut Lane City Northbrook State IL Zip Code 60062-6608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PCI Occupation Senior Vice President Public Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1456395514189 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Semi-Monthly)
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Annotti Mailing Address P.O. Box 44 City Glenview State IL Zip Code 60025-0044 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PCI Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1456534414189 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Semi-Monthly)

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

410.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Mr. Scott A. Joyner

Mailing Address 57 E. Delaware  
#2105

City State Zip Code  
Chicago IL 60611-1476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PCI

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1456541514189

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)

Mr. Gregory W. Heidrich

Mailing Address 49 Hawkins Circle

City State Zip Code  
Wheaton IL 60187-8463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PCI

Occupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1632197914189

Amount of Each Receipt this Period

230.00

P/R Deduction (\$115.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)

Ms. Ann W. Spragens

Mailing Address 5510 Chase Avenue

City State Zip Code  
Downers Grove IL 60515-4268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PCI

Occupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1632493214189

Amount of Each Receipt this Period

100.00

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

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

380.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Benjamin J. McKay

Mailing Address 1401 South Joyce Street

City State Zip Code  
Arlington VA 22202-1874

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PCI

Occupation  
Director Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y

**Transaction ID:** PR1695170214189

Amount of Each Receipt this Period

130.00

P/R Deduction (\$65.00 Semi-Monthly)

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

130.00

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

34644.44

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

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

FOR LINE NUMBER: PAGE 30 / 40

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

US Bank

Mailing Address 9575 West Higgins Road

City

Rosemont

State

IL

Zip Code

60018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

326.01

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: 24166554

Amount of Each Receipt this Period

35.35

Bank Interest May 2006

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

35.35

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

35.35

# **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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Matheson for Congress**

Mailing Address 677 South 200 West Suite A

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Repr Jim Matheson

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 2

Transaction ID: 23956022

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

**B. John Cornyn for Senate**

Mailing Address 6850 Austin Centre Blvd.  
Suite 180

City Austin State TX Zip Code 78731

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. John Cornyn

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 0

Transaction ID: 23955883

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

**C. John Cornyn for Senate**

Mailing Address 6850 Austin Centre Blvd.  
Suite 180

City Austin State TX Zip Code 78731

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. John Cornyn

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 0

Transaction ID: 23958100

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. RNC Majority Fund**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003-1885

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: 23955255

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

15000.00

## **B. Charlie Dent For Congress**

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement

Candidate Name  
Mr. Charles Dent

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 15

Transaction ID: 23956076

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

## **C. Salazar For Senate**

Mailing Address PO Box 600

City Denver State CO Zip Code 80201

Purpose of Disbursement

Candidate Name  
Sen. Ken Salazar

011  
Category/  
Type

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

State: CO District: 2

Transaction ID: 23955927

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

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

17000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. 2006 Joint Candidate Committee**

Mailing Address 228 S. Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 23938187

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

10000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. White Mountain PAC**

Mailing Address P.O. Box 1772

City Concord State NH Zip Code 03302

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 23958103

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

## **C. Melissa Bean For Congress**

Mailing Address Post Office Box 3068

City Barrington State IL Zip Code 60010

Purpose of Disbursement

Candidate Name  
Rep. Melissa Bean

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 8

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 23982964

Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

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

12000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. Senate Majority Fund**

Mailing Address 507 Capitol Court, NE  
Suite 100

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 23982849

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. WedgePAC**

Mailing Address P.O. Box 680063

City Franklin State TN Zip Code 37068

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 23982704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

## **C. Hooley for Congress**

Mailing Address PO Box 2050

City Salem State OR Zip Code 97308

Purpose of Disbursement

Candidate Name  
Repr Darlene Hooley

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OR District: 5

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 23983569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Santorum 2006

Mailing Address 1203 Portner Rd.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Sen. Rick Santorum

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 2

Transaction ID: 23983574

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Santorum 2006

Mailing Address 1203 Portner Rd.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Sen. Rick Santorum

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 2

Transaction ID: 23983576

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Restore America PAC

Mailing Address 2100 M St., NW  
 #170-286

City Washington State DC Zip Code 20037

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23983571

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Mark Kennedy 06

Mailing Address P.O. Box 49333

City Blaine State MN Zip Code 55449

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
The Honorable Mark Kennedy

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

State: MN District:

Transaction ID: 23983565

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

2000.00

**B.** Senate Majority Fund

Mailing Address 507 Capitol Court, NE  
Suite 100

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 23983572

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

1000.00

**C.** Senate Majority Fund

Mailing Address 507 Capitol Court, NE  
Suite 100

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Void - Senate Majority Fund

011

Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 23985532

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Senate Majority Fund

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

2000.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Lincoln Chafee for U.S. Senate

Mailing Address 425 Second Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Sena Lincoln Chafee

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

State: RI District:

Transaction ID: 24022935

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** PHILPAC

Mailing Address C/O 104 Hume Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 24022927

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C.** Freedom Fund

Mailing Address 1155 21st Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 24022922

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

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

6500.00

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

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

Use separate schedule(s)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Israel for Congress

Mailing Address P.O. Box 777

City  
Deer Park

State  
NY

Zip Code  
11729-0777

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Representative Steve Israel

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 2

Transaction ID: 24047931

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Pomeroy for Congress

Mailing Address P.O. Box 746

City  
Bismark

State  
ND

Zip Code  
58502

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Representative Earl Pomeroy

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND District: 1

Transaction ID: 24047933

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ryun for Congress

Mailing Address P.O. Box 826

City  
Topeka,

State  
KS

Zip Code  
66601-0826

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Repr Jim Ryun

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS District: 2

Transaction ID: 24047930

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

Use separate schedule(s)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Tom Feeney for Congress

Mailing Address PO Box 2601

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

Candidate Name  
Repr Tom Feeney

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 24

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 24047916

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

2000.00

**B.** Mario Diaz-Balart For Congress

Mailing Address 2801 Ponce De Leon Blvd. Ste1000

City Coral Gables State FL Zip Code 33134

Purpose of Disbursement

Candidate Name  
Rep. Mario Diaz-Balart

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 25

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 24047918

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1000.00

**C.** Brian Bilbray For Congress

Mailing Address 2466 Unicornio Street

City Carlsbad State CA Zip Code 92009

Purpose of Disbursement

Candidate Name  
Mr. Brian Bilbray

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 50

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼  
2006 Other

011  
Category/  
Type

Transaction ID: 24065173

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

52000.00

# **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)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** Ohioans for Justice O'Donnell

Mailing Address 500 S. Front Street  
#700

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Terrence O'Donnell, SUPREME COURT JUSTICE

Candidate Name  
Just Terrence O'Donnell

Office Sought: ☐ House  
☐ Senate  
☐ President

State: OH District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID: 23982989**

Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

1250.00

Terrence O'Donnell, SUPREME COURT JUSTICE OH

Full Name (Last, First, Middle Initial)

**B.** Cupp for Supreme Court

Mailing Address 500 S. Front Street  
#700

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Robert Cupp, SUPREME COURT JUSTICE OH

Candidate Name  
Just Robert Cupp

Office Sought: ☐ House  
☐ Senate  
☐ President

State: OH District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID: 23982986**

Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

1250.00

Robert Cupp, SUPREME COURT JUSTICE OH

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

2500.00

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

2500.00