

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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Office Use Only

FEC MAIL CENTER
12 FEB 4 5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

ADDRESS (number and street)

00343384 091906 N 298
DANIEL P FERRIS
SECURA INSURANCE A MUTUAL COMP
ANY PAC (SECURA INS PAC)
2401 S MEMORIAL DRIVE
APPLETON WI 54915

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

00343384

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / 2012 through / / 2012

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 Daniel P. Ferris

Signature of Treasurer *Daniel P. Ferris*

Date / / 2013

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							
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FEC FORM 3X
Rev. 12/2004

13031003257

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

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

12031003258

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		<input type="text" value="3,116.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1,960.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="544.32"/>	<input type="text" value="7,550.52"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2,504.32"/>	<input type="text" value="10,666.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16.32"/>	<input type="text" value="8,178.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2,488.00"/>	<input type="text" value="2,488.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	

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. 06/2004)

Page 3

Write or Type Committee Name

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Report Covering the Period: From:

11 / 27 / 2012

To:

12 / 31 / 2012

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

Than Political Committees

(i) Itemized (use Schedule A).....

240.00

2,920.00

(ii) Unitemized.....

188.00

4,452.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

528.00

7,372.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

528.00

7,372.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16.32

178.52

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

544.32

7,550.52

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

544.32

7,550.52

85250015031

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	16.32	178.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16.32	178.52
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16.32	8,178.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16.32	8,178.52

13031003260

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)	528.00	7,372.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	528.00	7,372.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16.32	178.52
37. Offsets to Operating Expenditures (from Line 15, page 3)	16.32	178.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

13031003261

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

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

FOR LINE NUMBER: (check only one)		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)

A. BYKOWSKI, JOHN A.

Mailing Address

3924 COBBLE CREEK DRIVE

City

APPLETON WI 54913

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer
SECURA
Insurance, A Mutual Company

Occupation
President, CEO & Chairman

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

40.00

\$ 20.00 bi-weekly

Full Name (Last, First, Middle Initial)

B. BEMIS, JEFFREY J.

Mailing Address

2814 E. LANSEY CT.

City

APPLETON WI 54913

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer
SECURA
Insurance, A Mutual Company

Occupation
VP & CIO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

20.00

\$ 10.00 bi-weekly

Full Name (Last, First, Middle Initial)

C. BRECUNIER, ANTHONY J.

Mailing Address

5812 INDIAN SHORES RD.

City

WINNECONNE WI 54986

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer
SECURA
Insurance, A Mutual Company

Occupation
Director of Work Comp.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

20.00

\$ 10.00 bi-weekly

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

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

MM / DD / YYYY
MM / DD / YYYY

13031003262

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

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

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NAME OF COMMITTEE (In Full)
SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

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

Mailing Address
7842 MEADOWOOD DR.

City State Zip Code
HUDSONVILLE MI 49426

FEC ID number of contributing federal political committee. **C 00343384**

Name of Employer **SECURA Insurance, A Mutual Company** Occupation **Sr. Market Manager**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
____ / ____ / _____

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

Full Name (Last, First, Middle Initial)
B. DYE GLEN E.

Mailing Address
4266 E. HINSDALE CIRCLE

City State Zip Code
CENTENNIAL CO 80122

FEC ID number of contributing federal political committee. **C 00343384**

Name of Employer **SECURA Insurance, A Mutual Company** Occupation **Regional VP-Sales**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
____ / ____ / _____

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

Full Name (Last, First, Middle Initial)
C. ENERSON, HARVEY L.

Mailing Address
15206 DANBURY AVE.

City State Zip Code
ROSEMOUNT MN 55068

FEC ID number of contributing federal political committee. **C 00343384**

Name of Employer **SECURA Insurance, A Mutual Company** Occupation **Regional VP-Sales**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
____ / ____ / _____

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

SUBTOTAL of Receipts This Page (optional).....▶ **260.00**

TOTAL This Period (last page this line number only).....▶ **260.00**

13031003263

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE	OF
	<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)
SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)
A. FERRIS, DANIEL P.

Mailing Address
2365 WOODLAND HILLS DR.

City State Zip Code
MENASHA WI 54952

FEC ID number of contributing federal political committee.
C 00343384

Name of Employer Occupation
SECURA Insurance, A Mutual Company VP, Gen. Counsel & Corp. Sec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
[] / [] / []

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

Full Name (Last, First, Middle Initial)
B. GROSS, DAVID D.

Mailing Address
501 E. TIMBERLINE DR.

City State Zip Code
APPLETON, WI 54913

FEC ID number of contributing federal political committee.
C 00343384

Name of Employer Occupation
SECURA Insurance, A Mutual Company Sr. VP-Underwriting Opns.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
[] / [] / []

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

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

Mailing Address
3313 N. RAMBLING ROSE

City State Zip Code
APPLETON WI 54914

FEC ID number of contributing federal political committee.
C 00343384

Name of Employer Occupation
SECURA Insurance, A Mutual Company Director - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
[] / [] / []

Amount of Each Receipt this Period
20.00

\$ **10.00** bi-weekly

SUBTOTAL of Receipts This Page (optional).....▶ []

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

13031003264

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

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

FOR LINE NUMBER: (check only one)		PAGE	OF
<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)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)

A. MAUTHE, JOHN P.

Mailing Address

7025 LAKE RD

City

WINDSOR WI 53532

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer SECURA

Insurance, A Mutual Company

Occupation

Director-Specialty Lines

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM	DD	YYYY

Amount of Each Receipt this Period

20.00

\$ 10.00 bi-weekly

Full Name (Last, First, Middle Initial)

B. POHJOLA, TERRIE A.

Mailing Address

1311 N. BRIARCLIFF DR.

City

APPLETON WI 54915

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer SECURA

Insurance, A Mutual Company

Occupation

Reg. VP-Sales (Retired)

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM	DD	YYYY

Amount of Each Receipt this Period

-0-

\$ -0- bi-weekly

Full Name (Last, First, Middle Initial)

C. VAN DEN BRANDT JEAN A.

Mailing Address

1207 S. CLARA STREET

City

APPLETON WI 54915

State

Zip Code

FEC ID number of contributing federal political committee.

C 00343384

Name of Employer SECURA

Insurance, A Mutual Company

Occupation

VP-Marketing

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM	DD	YYYY

Amount of Each Receipt this Period

20.00

\$ 10.00 bi-weekly

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

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

240.00

13031003265

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *up>* Shipping Date
1/7/13
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JMP
 PREPARER

1/14/13
 DATE PREPARED

99250012021