

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

ADDRESS (number and street) 20 F Street, NW Suite 610 Washington DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00022343 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 12 / 01 / 2017 through 12 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Riedel, Nathan M., , , Type or Print Name of Treasurer

Signature of Treasurer Riedel, Nathan M., , , [Electronically Filed] Date 02 / 22 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		195066.45
(b) Cash on Hand at Beginning of Reporting Period.....	145696.38	
(c) Total Receipts (from Line 19) .....	201092.45	1111564.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	346788.83	1306630.97
7. Total Disbursements (from Line 31).....	99898.18	1059740.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	246890.65	246890.65
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

Write or Type Committee Name

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	164639.01	836710.41
(ii) Unitemized .....	36453.44	235171.78
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	201092.45	1071882.19
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	201092.45	1071882.19
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	34682.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	201092.45	1111564.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	201092.45	1111564.52

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1799.18	20741.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1799.18	20741.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	96000.00	1036500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	2099.00	2499.00
(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)).....	2099.00	2499.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	99898.18	1059740.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99898.18	1059740.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	201092.45	1071882.19
34. Total Contribution Refunds (from Line 28(d)) .....	2099.00	2499.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	198993.45	1069383.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1799.18	20741.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1799.18	20741.32

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This amendment reports \$1,799.18 in disbursements on line 21b (other federal operating expenditures) from credit card processing charges that were mistakenly omitted from the original report filed on 1/31/18.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 178  
(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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Durland, Garrett, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 Oakland Ave  
 City Warwick State NY Zip Code 10990-1532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seely & Durland, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2017  
**Transaction ID : 15206226**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Holmes, Tony, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2017  
**Transaction ID : 15206227**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Gresham, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5900 Poplar Ave  
 City Memphis State TN Zip Code 38119-3900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boyle Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2017  
**Transaction ID : 15206260**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Keeton, Gerald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1140 NW 50th St  
 City Oklahoma City State OK Zip Code 73118-4402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cole, Paine & Carlin Insurance Agency, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 01 / 2017  
**Transaction ID : 15206261**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Griffin, Johnny, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 414 N Kentucky St  
 City Kingston State TN Zip Code 37763-2627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Griffin Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 01 / 2017  
**Transaction ID : 15206368**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Luttrell, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6800 Isaacs Orchard Rd  
 City Springdale State AR Zip Code 72762-6096  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Walker Brothers Insurance, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209051**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 178  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Barbour, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4555 Mansell Road Suite 300  
 City Alpharetta State GA Zip Code 30022-8279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Georgi Occupation (for Individual) Vice President, Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209052**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Siegel, Andy, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2987 Clairmont Rd NE Suite # 425  
 City Brookhaven State GA Zip Code 30329-4433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Siegel Insurance, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209053**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Kinkade, Stephen, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 S Main Street  
 City Leitchfield State KY Zip Code 42754-1091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kinkade-Cornell Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1135.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209055**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Record, Neil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10942 Plank Road  
 City Clinton State LA Zip Code 70722-3311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Record Agency, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209056**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Luebbering, Dennis, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2717 Industrial Dr Ste A  
 City Jefferson City State MO Zip Code 65109-0887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Luebbering Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209057**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Bassett, Elliot, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4331 N 156th St  
 City Omaha State NE Zip Code 68116-1429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ellerbrock-Norris Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209058**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Gibbons, Josh, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 W Watauga Ave  
 City Johnson City State TN Zip Code 37604-5623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Watauga Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209060**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Backer, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8401 S 142nd Ave  
 City Omaha State NE Zip Code 68138-3533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NAU Country Crop Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209063**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Murphy, Dennis, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Oxford Ln  
 City East Longmeadow State MA Zip Code 01028-2600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ventry Associates Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209086**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 178
	<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Trudeau, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 90 Parker St  
 City Gardner State MA Zip Code 01440-3809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Insurance Center of New England Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209087**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Adimando, Vincent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 372 Willis Ave  
 City Mineola State NY Zip Code 11501-1818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Double Eagle Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209089**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Peters, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 527 Route 22  
 City Pawling State NY Zip Code 12564-1218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rose & Kiernan Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2017  
**Transaction ID : 15209091**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Shipper, Barry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Huntington Quad Ste 1N11  
 City Melville State NY Zip Code 11747-4403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Prime Coverage Corp. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209092**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Norris, Cris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 520 South First Street  
 City Lamesa State TX Zip Code 79331-6246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Henry Norris Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209098**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Kekula, Rick, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 828 John Nolen Drive  
 City Madison State WI Zip Code 53713-1424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M3 Insurance Solutions, Inc. Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209099**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Durland, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 Oakland Ave  
 City Warwick State NY Zip Code 10990-1532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seely & Durland Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209128**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Jackman, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 312 E Main St  
 City Carbondale State IL Zip Code 62901-3010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Consolidated Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2017  
**Transaction ID : 15209135**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Elliott, Brock, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 278 Fairlane Dr  
 City Louisburg State KS Zip Code 66053-4598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elliott Insurance Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209145**  
 Amount of Each Receipt this Period 130.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	630.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Chapin, Christopher, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2711 W 6th St Suite A  
 City Lawrence State KS Zip Code 66049-4306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stephens/Chapin Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209320**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Sheppard, G Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 Gracern Rd  
 City Columbia State SC Zip Code 29210-7693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IABSC Agency Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1315.00

Date of Receipt 12 / 01 / 2017  
**Transaction ID : 15209658**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Webster, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13080 S Belcher Rd Ste H  
 City Largo State FL Zip Code 33773-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jack Rice Insurance, LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 01 / 2017  
**Transaction ID : 15209660**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Watson, Thomas, C, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 E 2nd Ave

City Gastonia	State NC	Zip Code 28052-4369
------------------	-------------	------------------------

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

Name of Employer (for Individual) Watson Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

**Transaction ID : 15209663**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Cook, John, T, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4605D Oleander Drive Oleander Prof

City Myrtle Beach	State SC	Zip Code 29578-8100
----------------------	-------------	------------------------

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

Name of Employer (for Individual) John T Cook & Assocs	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2017

**Transaction ID : 15209664**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 115 Directors Row

City Jackson	State TN	Zip Code 38305-2316
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Allison Insurance Group, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2017

**Transaction ID : 15209667**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 17 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Traeger, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3350 S Dixie Highway  
 City Miami State FL Zip Code 33133-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kahn-Carlin and Company, Inc Occupation (for Individual) VP of Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2017  
**Transaction ID : 15209668**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Gaetano, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 420 William St  
 City Williamsport State PA Zip Code 17701-6109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Hartman Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2017  
**Transaction ID : 15209669**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Zeno, Lynn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5000 N Shore Dr  
 City North Little Rock State AR Zip Code 72118-5324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Arkans Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2017  
**Transaction ID : 15209670**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Holmes, Geoffrey, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4455 S Pecos Road  
 City Las Vegas State NV Zip Code 89121-5029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GLB Insurance Group of Nevada Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209672**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Weisenburger, Dave, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 East Broadway  
 City Mount Pleasant State MI Zip Code 48858-2725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) General Agency Company Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209674**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Shook, Stephen, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 219 E Lawrence Ave  
 City Charlotte State MI Zip Code 48813-1520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Russell & Schrader Insurance Agency In Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209676**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mucci, Don, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 Alliant Ave  
 City Louisville State KY Zip Code 40299-6338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Garrett-Stotz Company Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209682**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Boer, David, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2535 5 Mile Rd NE  
 City Grand Rapids State MI Zip Code 49525-7215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boer Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209684**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Threlkeld, Kenneth, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 WSW Loop 323  
 City Tyler State TX Zip Code 75701-9455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Threlkeld & Company Insurance Agency Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209687**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Pinson, Maurice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2000 Glen Echo Road  
 Suite 100  
 City Nashville State TN Zip Code 37215-2857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Transport Specialties Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209689**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Hierl, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 325 Trowbridge Drive  
 City Fond Du Lac State WI Zip Code 54937-9180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hierl Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209690**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Garner, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 295 East Palmer St  
 City Franklin State NC Zip Code 28734-3049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wayah Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209705**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Chester, Dalton, M., , 7107819**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1380 Ackerman Rd  
 City San Antonio State TX Zip Code 78219-3502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Transportation Insurance Service Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15209706**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. McGehee, William, , , IV**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 Spring St N  
 City Talladega State AL Zip Code 35160-2028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Talladega Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 06 / 2017  
**Transaction ID : 15210273**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Fekete, Timothy, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1025 S Mitchell St  
 City Cadillac State MI Zip Code 49601-2517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fekete Knaggs & Burr Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2017  
**Transaction ID : 15210282**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Guerin, Ron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Oak St  
 City Bangor State ME Zip Code 04401-6515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varney Agency | Insurance & Bonding - Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 12 / 05 / 2017  
**Transaction ID : 15210284**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Schilling, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 East Oak  
 City Amite State LA Zip Code 70422-2815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Schilling & Reid Insurance Agency, Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 12 / 06 / 2017  
**Transaction ID : 15210289**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Hernandez, Joe, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3643 Australian Cloud Dr  
 City Las Vegas State NV Zip Code 89135-7803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Branch-Hernandez & Associates Occupation (for Individual) President/ COO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 12 / 06 / 2017  
**Transaction ID : 15210591**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Elliott, Charles, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 278 Fairlane Dr  
 City Louisburg State KS Zip Code 66053-4598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elliott Insurance Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210621**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Grissom, Gary, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1120 Capital of Texas Hwy South Bldg 3 Ste 300  
 City West Lake Hills State TX Zip Code 78746-6426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Texas Associates Insurors Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210623**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Davis, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3340 Peachtree Rd NE Suite 1755  
 City Atlanta State GA Zip Code 30326-1080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rhodes Risk Advisors Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210626**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Jackson, Nancy, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 315 N Market St  
 City Benton State AR Zip Code 72015-3734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Roberson & Associates Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210627**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Perret, Martin, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1921 Kaliste Saloom Suite 210  
 City Lafayette State LA Zip Code 70508-6184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quality Plus Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210628**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Graham, Candace, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2017  
**Transaction ID : 15210629**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Harbour, Stark, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4562 Lawrenceville Hwy  
Suite 120

City Liburn State GA Zip Code 30047-3650

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

Name of Employer (for Individual) William Adams & Associates, Inc. Occupation (for Individual) Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2150.00

Date of Receipt 12 / 06 / 2017  
**Transaction ID : 15210631**

Amount of Each Receipt this Period 50.00

Memo Item

**B. McBride, Mike, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3290 West Big Beaver Rd  
Suite 503

City Troy State MI Zip Code 48084-2917

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

Name of Employer (for Individual) Mason-McBride, Inc. Occupation (for Individual) President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 12 / 06 / 2017  
**Transaction ID : 15210633**

Amount of Each Receipt this Period 3000.00

Memo Item

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

Mailing Address 127 South Peyton Street

City Alexandria State VA Zip Code 22314-2879

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

Name of Employer (for Individual) Independent Insurance Agents & Brokers Occupation (for Individual) Executive Director - ACT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15210640**

Amount of Each Receipt this Period 150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Fisk, Johnny, Patrick, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8110 Breakwater Dr  
 City New Orleans State LA Zip Code 70124-1616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fisk Marine Insurance International. L Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 06 / 2017  
**Transaction ID : 15210641**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Bernier, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8354 Northfield Blvd Suite 2710  
 City Denver State CO Zip Code 80238-3185  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Trusted Choice Insurance Agents of Col Occupation (for Individual) Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15210870**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Smoller, Elizabeth, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 Poyntz Suite 205  
 City Manhattan State KS Zip Code 66502-0126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Charlson-Wilson Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15213044**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 27 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Townley, Rob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 Clairemont Ave Ste 520  
 City Decatur State GA Zip Code 30030-2551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Townley-Kenton, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15213438**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Bolz, Ronald, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Topeka Ave  
 City Lyndon State KS Zip Code 66451-9869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bolz Insurance, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15213841**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Spurgin, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2521 Cedar Springs Rd  
 City Dallas State TX Zip Code 75201-1460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ben Spurgin Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15220517**  
 Amount of Each Receipt this Period 800.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Brassard, Christopher, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1924 Western Ave Ste 1  
 City Albany State NY Zip Code 12203-5077  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ten Eyck Group Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15220522**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Tubertini, Ronald, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 795 Woodlands Parkway # 101  
 City Ridgeland State MS Zip Code 39157-5217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SouthGroup Insurance and Financial Ser Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15221343**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Chapin, Cooper, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2711 W 6th St Suite A  
 City Lawrence State KS Zip Code 66049-4306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stephens/Chapin Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 07 / 2017  
**Transaction ID : 15221345**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Jannett, Alan, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 East Liberty Street  
 City Farmington State MO Zip Code 63640-3128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) First State Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221348**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Goodman, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1990 E Santa Fe Ste 103  
 City Olathe State KS Zip Code 66062-1660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J. Goodman Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221431**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Laday-Davis, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1313 Cuming St Ste 200  
 City Omaha State NE Zip Code 68102-4439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Davis Insurance Agency, Inc. Occupation (for Individual) Agency Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221487**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 30 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Foster, Jana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3660 Lakeview Road  
 City Carson City    State NV    Zip Code 89703-9402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nevada Insurance Agency Company    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221494**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Smith-Engell, Theresa, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 304 Nelson St  
 City Cambridge    State NE    Zip Code 69022-3592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HomeTown Agency, LLC    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221498**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Fuqua, Chad, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 726  
 City Hesston    State KS    Zip Code 67062-0726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fuqua Insurance Group    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221545**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Wilson, Bradley, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 B Street Suite 2300  
 City San Diego State CA Zip Code 92101-4289  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wilson and Company Insurance Services, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221548**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Verisario, Keith, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1000 E Warrenville Rd Ste 101  
 City Naperville State IL Zip Code 60563-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Acrisure, LLC dba All-Security Insuran Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221549**  
 Amount of Each Receipt this Period  
 925.00  
 Memo Item

**C. Runnebaum, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O Box 148  
 City Seneca State KS Zip Code 66538-0148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SBS Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2017  
**Transaction ID : 15221550**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1675.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Peterson, Robert, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 708 Milam Suite 300  
 City Shreveport State LA Zip Code 71101-5499  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Keith D. Peterson & Company, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221551**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Stewart, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Weston Oaks Ct  
 City Cary State NC Zip Code 27513-2256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of North Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221552**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. McKinley, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2603 W Charleston Blvd  
 City Las Vegas State NV Zip Code 89102-2121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cragin & Pike Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221553**  
 Amount of Each Receipt this Period 350.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 178
	<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mackoul, Robert, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 214 West Park Avenue  
 City Long Beach State NY Zip Code 11561-3212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Empire Group, Ltd. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221554**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Henson, Duane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1503 Riverside Dr  
 City Mount Vernon State WA Zip Code 98273-2443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WAFD Insurance Group Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15221558**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Lewis, Suzanne, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 Pacific Ave # 1000  
 City Tacoma State WA Zip Code 98402-4321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Propel Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 10 / 2017  
**Transaction ID : 15221799**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 178
<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Winters, Ben, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8022 Mechanicsville Pike  
 City Mechanicsville State VA Zip Code 23111-1223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Winters Oliver Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 11 / 2017  
**Transaction ID : 15221803**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Mimica, Davor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9500 S Dadeland Blvd Ste 200  
 City Miami State FL Zip Code 33156-2866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) InSource, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2017  
**Transaction ID : 15222421**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Dawson, Thomas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 1st Avenue North  
 City Fargo State ND Zip Code 58102-4903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dawson Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 10 / 2017  
**Transaction ID : 15222423**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Brown, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2491 Cedar Park Dr  
 City Holt State MI Zip Code 48842-2184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Holt & Dimondale Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 11 / 2017  
**Transaction ID : 15222424**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Watkins, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3834 Spicewood Springs Ste 100  
 City Austin State TX Zip Code 78759-8977  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Watkins Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 11 / 2017  
**Transaction ID : 15225965**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. McQuary, Don, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 5th St  
 City Clarkston State WA Zip Code 99403-1970  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stonebraker McQuary Agency Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 11 / 2017  
**Transaction ID : 15227542**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mandigo, Evan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2489 Timberlane Place  
 City Bismarck State ND Zip Code 58504-8918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ind Ins Agts of North Dakota Occupation (for Individual) State Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 11 / 2017  
**Transaction ID : 15227551**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Cooke, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 Harrison St Ste 201  
 City Batesville State AR Zip Code 72501-6900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) White River Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227580**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Malick, Zuri, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 South Street  
 City Manasquan State NJ Zip Code 08736-3419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Parker Agency Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227587**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bayless, W., David, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2007 Texoma Parkway # 126  
 City Sherman State TX Zip Code 75090-2694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bayless-Hall Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227589**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Schmitz, Bryan, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 Main Street  
 City Seneca State KS Zip Code 66538-1923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SBS Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227614**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Roberts, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 Natchez Trace Dr S  
 City Lexington State TN Zip Code 38351-2172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carnal-Roberts Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227627**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Goodman, Wallace, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 S Carancahua St  
 4th Floor  
 City Corpus Christi State TX Zip Code 78401-3044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Borden Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227629**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Lauve, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3005 S Treadaway Blvd  
 City Abilene State TX Zip Code 79602-6729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CBS Insurance, LLP Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227634**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Watson, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3005 S Treadaway Blvd  
 City Abilene State TX Zip Code 79602-6729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CBS Insurance, LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227635**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Stay, Nick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6429 S Tacoma Way  
 City Tacoma State WA Zip Code 98409-4097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Underwriters Ins Agencies Inc Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227643**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Hansen, Raymond, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 North Corporate Drive Suite 100  
 City Brookfield State WI Zip Code 53045-5800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Diversified Insurance Solutions, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227644**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Holst, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11911 NE 1st St Ste B103  
 City Bellevue State WA Zip Code 98005-3032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ind Ins Agts & Brkrs of Washington Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : 15227659**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	770.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 40 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Knobeloch, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3109 N 29th St  
 City Tacoma State WA Zip Code 98407-6534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARM Northwest, Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227663**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**B. Merrill, Dave, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9259 57TH AVE S  
 City SEATTLE State WA Zip Code 98118-6003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Merrill & Merrill Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227670**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Tripple, Robert, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 Admiral Wy Ste 101  
 City Edmonds State WA Zip Code 98020-7230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tripple Tripple & Tripple LLC Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : 15227683**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**TOTAL** This Period (last page this line number only).....▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Heuer, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5050 Vista Blvd Ste 101  
 City Sparks State NV Zip Code 89436-2845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Heuer Insurance Agency, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **12 / 12 / 2017**  
**Transaction ID : 15227786**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. McCorkle, Tommy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 NE Loop 410 Suite 700  
 City San Antonio State TX Zip Code 78209-1303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McCorkle Commercial Insurance Agency , Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 13 / 2017**  
**Transaction ID : 15227811**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Dean, Kyle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3131 W Alabama 4th Fl  
 City Houston State TX Zip Code 77098-2030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dean & Draper Insurance Agency, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 13 / 2017**  
**Transaction ID : 15227833**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Semmer, Gary, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1811 High Grove Ln  
 Ste 139  
 City Naperville State IL Zip Code 60540-9100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Esser/Hayes Ins. Group, Inc Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 13 / 2017**  
**Transaction ID : 15228066**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Hotchkiss, Douglas, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 511 University Dr E Ste 203  
 City College Station State TX Zip Code 77840-1748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hotchkiss Insurance Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **12 / 14 / 2017**  
**Transaction ID : 15233464**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Cousins, Andrew, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1154 S Governors Ave  
 City Dover State DE Zip Code 19904-6904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) L & W Insurance Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 14 / 2017**  
**Transaction ID : 15233471**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Cocke, Steve, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 South Peyton Street  
 City Alexandria State VA Zip Code 22314-2879  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents & Brokers Occupation (for Individual) Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1017.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233497**  
 Amount of Each Receipt this Period  
 1017.00  
 Memo Item

**B. Knox, Jr., Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Main St  
 City Thomson State GA Zip Code 30824-2615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Watson & Knox, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233498**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Sylvia-Armstrong, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 Faunce Corner Rd Building 100  
 City Dartmouth State MA Zip Code 02747-1278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sylvia & Co. Ins. Agency Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233499**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1567.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Luttrell, Mike, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6800 Isaacs Orchard Rd

City Springdale	State AR	Zip Code 72762-6096
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Walker Brothers Insurance, Inc.	Occupation (for Individual) Vice President
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2017

**Transaction ID : 15233517**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. Renn, Austin, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 S Washington

City Wellington	State KS	Zip Code 67152-3037
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Renn & Company, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2017

**Transaction ID : 15233519**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Babineau, Marc, R., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 546 Electric Ave

City Fitchburg	State MA	Zip Code 01420-5370
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Babineau Insurance Agcy	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2017

**Transaction ID : 15233520**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. McClelland, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8231B Northwoods Dr  
 City Lincoln State NE Zip Code 68505-3092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Nebras Occupation (for Individual) Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233525**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Boenker, Al, H., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6030 Jacksboro Hwy  
 City Fort Worth State TX Zip Code 76135-3797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Al Boenker Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233526**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Dudney, Byron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1400 East Houston  
 City Beeville State TX Zip Code 78102-5311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TCOR Insurance Management Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2017  
**Transaction ID : 15233527**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Beckmann III, John, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 Poydras St Ste 1500  
 City New Orleans State LA Zip Code 70130-7214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J. Everett Eaves, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 14 / 2017  
**Transaction ID : 15233529**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Bates, Thomas, M, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Global Dr Ste 102  
 City Greenville State SC Zip Code 29607-3798  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herlong Bates Burnett Ins Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 12 / 14 / 2017  
**Transaction ID : 15233530**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Moran, Lou, S, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6209 Baum Dr  
 City Knoxville State TN Zip Code 37919-9503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Inter-Agency Insurance Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 14 / 2017  
**Transaction ID : 15233531**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Watson, Thomas, C, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 E 2nd Ave

City Gastonia	State NC	Zip Code 28052-4369
------------------	-------------	------------------------

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

Name of Employer (for Individual) Watson Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2017

**Transaction ID : 15233532**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Brady, Warren, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 N Main St

City Marion	State SC	Zip Code 29571-3026
----------------	-------------	------------------------

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

Name of Employer (for Individual) First Charter Co Inc	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2017

**Transaction ID : 15233533**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. McInturff III, John, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 237 W Summer St

City Greeneville	State TN	Zip Code 37743-4925
---------------------	-------------	------------------------

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

Name of Employer (for Individual) McInturff, Milligan & Brooks	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2017

**Transaction ID : 15233534**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. O'Connor, Joseph, A, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2450 Severn Avenue Suite 208

City Metairie	State LA	Zip Code 70001-1972
------------------	-------------	------------------------

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

Name of Employer (for Individual) O'Connor Insurance Group, LLC	Occupation (for Individual) President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2017

**Transaction ID : 15233536**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Plott, W., G., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 Mcfarland Blvd N

City Tuscaloosa	State AL	Zip Code 35406-2135
--------------------	-------------	------------------------

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

Name of Employer (for Individual) USI Insurance Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

**Transaction ID : 15233566**

Amount of Each Receipt this Period  
21.00

Memo Item

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

Mailing Address 8315 Cantrell Ste 300

City Little Rock	State AR	Zip Code 72227-2357
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BancorpSouth Insurance Services, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

**Transaction ID : 15233569**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	146.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Hair, Lanny, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 333 E Flower St  
 City Phoenix State AZ Zip Code 85012-2611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents and Broke Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233571**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Adams, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 Indiana Street Suite 750  
 City Golden State CO Zip Code 80401-5099  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ISU Insurance Services of Colorado, In Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233573**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. McCarron, Gillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7728 Vance Drive  
 City Arvada State CO Zip Code 80003-2140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lakeside Insurance Center Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233574**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Rifkin, Michael, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1499 Blake Street # 2G  
 City Denver State CO Zip Code 80202-1356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rifkin Insurance Assocs Inc Occupation (for Individual) Agency Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233575**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Byrnes, James, J., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77 cady lane  
 City Woodstock State CT Zip Code 06281-1800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Byrnes Agency, Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233576**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Pierz, William, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 488 Main Ave Ste 3  
 City Norwalk State CT Zip Code 06851-1008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shoff Darby Companies, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233577**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Pursell, Mary, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 671 State Street  
 City New Haven State CT Zip Code 06511-6509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Abbate Insurance Associates, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.37

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233578**  
 Amount of Each Receipt this Period  
 83.34  
 Memo Item

**B. Wilson, Lawrence, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 875 AAA Blvd Ste A  
 City Newark State DE Zip Code 19713-3624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) S T Good Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233579**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Courtheyn, Doreen, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 E New York Ave  
 City Deland State FL Zip Code 32724-6041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Page Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233581**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	158.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Della Porta, Veronica, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7807 Baymeadows Rd East Ste 301  
 City Jacksonville State FL Zip Code 32256-9667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Della Porta Group, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233582**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. Martin, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3159 Shamrock South  
 City Tallahassee State FL Zip Code 32309-3337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Florida Association of Insurance Agent Occupation (for Individual) Director of Health & Benefits  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233583**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Webb, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 Westward Drive  
 City Miami Springs State FL Zip Code 33166-5258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Coastal Insurance Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233585**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	480.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Abbott, Louis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2200 A Northside Crossing  
 City Macon State GA Zip Code 31210-2256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Reeves, Roland & Abbott Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233586**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Argo, Will, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5082 Forsyth Rd  
 City Macon State GA Zip Code 31210-2190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tidwell & Hilburn Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233587**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**C. Barbour, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4555 Mansell Road Suite 300  
 City Alpharetta State GA Zip Code 30022-8279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Georgi Occupation (for Individual) Vice President, Government Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233588**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	121.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bynum, Thad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 Hiwassee St  
 City Clayton State GA Zip Code 30525-0047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bynum Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 15 / 2017**  
**Transaction ID : 15233591**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Coard, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 209 S Jefferson Ave  
 City Eatonton State GA Zip Code 31024-1127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Peoples Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 15 / 2017**  
**Transaction ID : 15233594**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Davis, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3340 Peachtree Rd NE Suite 1755  
 City Atlanta State GA Zip Code 30326-1080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rhodes Risk Advisors Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **12 / 15 / 2017**  
**Transaction ID : 15233595**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Frazier, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3461F Lawrenceville Suwanee Rd  
 City Suwanee State GA Zip Code 30024-6428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Allied Insurance Advisors, LLC Occupation (for Individual) Member  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233599**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Griffin, Amanda, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3021 Atlanta Highway  
 City Athens State GA Zip Code 30606-3388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIC/Insuring America Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233600**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Harbour, Stark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4562 Lawrenceville Hwy Suite 120  
 City Lilburn State GA Zip Code 30047-3650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William Adams & Associates, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233603**  
 Amount of Each Receipt this Period 350.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	395.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 56 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mellars, Michael, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 East Paces Ferry Rd NE  
 Atlanta Plaza Suite 2000  
 City Atlanta State GA Zip Code 30326-1180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pritchard & Jerden, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233608**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Ware, Christy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4555 Mansell Road Suite 300  
 City Alpharetta State GA Zip Code 30022-8279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Georgi Occupation (for Individual) Chief Operations Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233609**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Monk, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 N Isabella St  
 City Sylvester State GA Zip Code 31791-2158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Worth Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233610**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Moore, Robert, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 245 Davis Rd  
 City Augusta State GA Zip Code 30907-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blanchard & Calhoun Insurance Agency, Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233611**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Olson, Betsy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4555 Mansell Road Suite 300  
 City Alpharetta State GA Zip Code 30022-8279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Georgi Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233612**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

**C. Smith, Ash, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 245 Davis Rd  
 City Augusta State GA Zip Code 30907-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blanchard & Calhoun Insurance Agency, Occupation (for Individual) Account Executive, VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233615**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Stewart, Sean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Saint Andrews Ct Ste 101  
 City Brunswick State GA Zip Code 31520-6791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Turner & Associates Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233616**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**B. Stiles, Wilson, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 214 Andrews St  
 City Rossville State GA Zip Code 30741-1603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Agency Service Group, Inc. dba Flegal Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233617**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Tamplin, Julianne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11330 Lakefield Dr Ste 100  
 City Duluth State GA Zip Code 30097-1578  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J Smith Lanier & Company of Atlanta Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233618**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Tripp, Roslyn, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5526 Old National Hwy  
 Bldg I  
 City College Park State GA Zip Code 30349-3212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233620**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Tripp, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5526 Old National Hwy  
 Bldg I  
 City College Park State GA Zip Code 30349-3212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233621**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Tripp, Lashaune, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5526 Old National Hwy  
 Bldg I  
 City College Park State GA Zip Code 30349-3212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017  
**Transaction ID : 15233622**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sump, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 North 15th Street  
 City Clarinda State IA Zip Code 51632-1614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sump Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233626**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Redman, Jordan, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15433 N Stevens St  
 City Rathdrum State ID Zip Code 83858-8377  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Redman & Company Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233627**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Henricks, Todd, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 S Jackson St  
 City Cerro Gordo State IL Zip Code 61818-0110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chapman-Henricks Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233628**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Schwaller, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15440 S Harlem Ave  
 City Orland Park State IL Zip Code 60462-4333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Schwaller Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233629**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Schultheis, Brett, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 N Weinbach Ave  
 City Evansville State IN Zip Code 47711-6004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Schultheis Insurance Agency Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233631**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Blumberg, Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8560 Jefferson Hwy  
 City Baton Rouge State LA Zip Code 70809-2230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blumberg and Associates, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233632**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 120.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 62 OF 178  
(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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Case, Brenda, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 First Street  
 City Slidell State LA Zip Code 70458-3401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lowry-Dunham, Case & Vivien Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233633**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Durand-McMorris, Lydia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 Convention St Ste 200  
 City Baton Rouge State LA Zip Code 70802-5616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regions Insurance Occupation (for Individual) Account Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233634**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Ellis, Parke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1615 Poydras Street Suite 700  
 City New Orleans State LA Zip Code 70112-1298  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gillis, Ellis & Baker, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233635**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Hughes, Brad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 S Purpera Ave Ste 100  
 City Gonzales State LA Zip Code 70737-4379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Hughes Insurance Services, Inc. Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 12 / 15 / 2017  
**Transaction ID : 15233636**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Hughes, Bret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 S Purpera Ave Ste 100  
 City Gonzales State LA Zip Code 70737-4379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Hughes Insurance Services, Inc. President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 12 / 15 / 2017  
**Transaction ID : 15233637**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Jenkins, Richard, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1018 Main Street  
 City Franklinton State LA Zip Code 70438-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Moore & Jenkins Ins. Agcy., LLC Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 12 / 15 / 2017  
**Transaction ID : 15233638**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. O'Connor, Joseph, A, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2450 Severn Avenue Suite 208

City Metairie	State LA	Zip Code 70001-1972
------------------	-------------	------------------------

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

Name of Employer (for Individual) O'Connor Insurance Group, LLC	Occupation (for Individual) President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

**Transaction ID : 15233639**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Record, Neil, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10942 Plank Road

City Clinton	State LA	Zip Code 70722-3311
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Record Agency, Inc.	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

**Transaction ID : 15233640**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Schwing, Armond, K., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 10069

City New Iberia	State LA	Zip Code 70562-0069
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Schwing Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

**Transaction ID : 15233641**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Stiel, Donelson, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O Box 602  
 City Franklin State LA Zip Code 70538-0602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) David H. Stiel, Jr. Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233642**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Douglas, Rich, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 199 Great Road  
 City Acton State MA Zip Code 01720-5759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gallant Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233643**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fyntrilakis, Nick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 91 Cedar Street  
 City Milford State MA Zip Code 01757-1178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Massachusetts Association of Insurance Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1258.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233644**  
 Amount of Each Receipt this Period 162.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	287.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Gatti, Peter, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 Dwight Road Unit 309

City Longmeadow	State MA	Zip Code 01106-1761
--------------------	-------------	------------------------

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

Name of Employer (for Individual) G W Morisi Insurance Agency	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

**Transaction ID : 15233645**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. Gaudette, Lee, , , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Plummers Corner

City Whitinsville	State MA	Zip Code 01588-2135
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Gaudette Insurance Agency Inc	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

**Transaction ID : 15233646**

Amount of Each Receipt this Period  
120.00

Memo Item

**C. Richard, Philip, W., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 Garden Street Unit 1B

City Danvers	State MA	Zip Code 01923-1430
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Phil Richard Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

**Transaction ID : 15233647**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	170.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Jetmore, Ronald, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9545 HG Trueman Rd  
 City Lusby State MD Zip Code 20657-2876  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jetmore Insurance Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233648**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Ibarguen, Michelle, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2331 Congress St  
 City Portland State ME Zip Code 04102-1907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cross Insurance - Portland Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233649**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Mercure, Daniel, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22200 Huron River Drive  
 City Rockwood State MI Zip Code 48173-1153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mercure Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233651**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 68 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Gibbons, Roberta, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15710 Harmony Way  
 City Apple Valley State MN Zip Code 55124-7122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dyste Williams Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233652**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Thompson, Gloria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5851 Cedar Lake Rd S  
 City St Louis Park State MN Zip Code 55416-1481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233653**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Greer, Bradley, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1227 Fern Ridge Pkwy  
 City Saint Louis State MO Zip Code 63141-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Missouri General Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233654**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 155.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bailey, Anna, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6207 Park South Dr # 201  
 City Charlotte State NC Zip Code 28210-3653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Allen Tate Insurance Services, LLC. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233655**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Cook, Christopher, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 348 Summit Square Blvd  
 City Winston Salem State NC Zip Code 27105-1465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alliance Insurance Services, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233657**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Jones, Jerry, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 820 Benson Rd  
 City Garner State NC Zip Code 27529-3992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jones Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233659**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Knight, Aubie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Weston Oaks Ct  
 City Cary State NC Zip Code 27513-2256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of North Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233660**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Rice, Mark, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 Franklin St  
 City Fayetteville State NC Zip Code 28301-5679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Callahan & Rice Insurance Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233661**  
 Amount of Each Receipt this Period 12.50  
 Memo Item

**C. Anderson, Todd, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 209 E 6th Street  
 City York State NE Zip Code 68467-3014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Todd Anderson Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233662**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mason, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1265 S Cotner Blvd Ste 21  
 City Lincoln State NE Zip Code 68510-4974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Forsyth Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233664**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Paul, Andy, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1004 N Diers Ave Ste 140  
 City Grand Island State NE Zip Code 68803-4962  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INSUR, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233665**  
 Amount of Each Receipt this Period 20.83  
 Memo Item

**C. Ruzicka, Lori, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14010 FNB Pkwy Suite 300  
 City Omaha State NE Zip Code 68154-5210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Harry A. Koch Co. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233666**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.83  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Ryks, Sandra, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12120 Port Grace Blvd Ste 102  
 City Lavista State NE Zip Code 68128-8235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNICO Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233667**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**B. Jones, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 E Main St Suite E  
 City Millville State NJ Zip Code 08332-4293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William R. Mints Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233668**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Cotgreave, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 558 Portion Rd  
 City Ronkonkoma State NY Zip Code 11779-4572  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cotgreave Insurance Agency Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233669**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Crowley, Thomas, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 Hampton Rd Ste 1B  
 City Southampton State NY Zip Code 11968-5098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cook Maran & Associates Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233670**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Keiffert, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Orville Dr Ste 400  
 City Bohemia State NY Zip Code 11716-2535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hometown Ins. Agency of L.I. Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233671**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Sadlak, Steve, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 160 W Main St  
 City Vernon Rockville State CT Zip Code 06066-3503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Max Sadlak Agcy Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233672**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Smith, John, H., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Broadway  
 City Newburgh State NY Zip Code 12550-5304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William A. Smith & Son Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233673**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Sutton, James, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 143 E Main St Ste 1  
 City East Islip State NY Zip Code 11730-2601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) James F. Sutton Agency Ltd. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233674**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Seals, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 N Commerce # 104  
 City Ardmore State OK Zip Code 73401-1859  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Bramlett Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233675**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Male, Mark, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2400 Post Rd  
 City Warwick State RI Zip Code 02886-2208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RI Association of Insurance Agents, In Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233676**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Bartness, Zachary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2854 Wade Hampton Blvd Ste B  
 City TAYLORS State SC Zip Code 29687-2723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shared Alliance Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233677**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Edwards, Kent, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1066 Asheville Hwy  
 City Spartanburg State SC Zip Code 29303-2635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Correll Ins Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233679**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 76 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Muller, Andrew, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 Johnnie Dodds Blvd Ste 102  
 City Mount Pleasant State SC Zip Code 29464-3045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mappus Ins Agcy Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233681**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Sheppard, G Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 Gracern Rd  
 City Columbia State SC Zip Code 29210-7693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IABSC Agency Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233682**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

**C. Tadlock, Terry, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Bow Circle  
 City Hilton Head Island State SC Zip Code 29928-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Coastal Plains Insurance LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233683**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 195.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Theodore, Andrew, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 Laurel Street  
 City Columbia State SC Zip Code 29201-2625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Theodore & Associates Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1008.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233684**  
 Amount of Each Receipt this Period 84.00  
 Memo Item

**B. Walker, Richard, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2420 Hoffmeyer Rd Suite D  
 City Florence State SC Zip Code 29501-7426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSP Insurance Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233685**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Wiseman, Matthew, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 Ronnie Court  
 City Myrtle Beach State SC Zip Code 29579-4142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peoples Underwriters, Inc. - Myrtle Be Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233687**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	119.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bradshaw Jr., Robert, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8600 Mayland Dr  
 City Richmond State VA Zip Code 23294-4702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Virgin Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233688**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Via, Tommy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Hubbard St Ste A  
 City Blacksburg State VA Zip Code 24060-5745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leonard L Brown Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233691**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Knobloch, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3109 N 29th St  
 City Tacoma State WA Zip Code 98407-6534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARM Northwest, Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233692**  
 Amount of Each Receipt this Period 155.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	205.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Banaszynski, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 725 John Nolen Drive  
 City Madison State WI Zip Code 53713-1421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Wiscon Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233693**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Helbach, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 888 State Highway 153 Suite 200  
 City Mosinee State WI Zip Code 54455-9601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ansay & Associates LLC Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233694**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Gulley, Charles, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 4J Ct Unit A  
 City Gillette State WY Zip Code 82716-4110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HUB International-Gillette Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233695**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 178
<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bieniek, John, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Country Club Rd Ste 1  
 City Queensbury State NY Zip Code 12804-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cool Insuring Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233702**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Buse, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 S Peyton St  
 City Alexandria State VA Zip Code 22314-2879  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents & Brokers Occupation (for Individual) Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 17 / 2017  
**Transaction ID : 15233730**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Soucy, Paul, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 85 Lafayette St  
 City Salem State MA Zip Code 01970-3620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Soucy Insurance Agency Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15233738**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Foster, Jana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3660 Lakeview Road  
 City Carson City State NV Zip Code 89703-9402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nevada Insurance Agency Company Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233741**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Rice, Mark, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 Franklin St  
 City Fayetteville State NC Zip Code 28301-5679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Callahan & Rice Insurance Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233756**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Snipes, Dal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 N Wilson Ave  
 City Dunn State NC Zip Code 28334-4228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Snipes Insurance Service, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15233757**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	610.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Gudding, Jeremiah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8231B Northwoods Dr  
 City Lincoln State NE Zip Code 68505-3092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents of Nebras Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15233867**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Ellis, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Congress Street  
 City Milford State MA Zip Code 01757-4130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bright Agency Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236334**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Flavin, Shawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 216 Park Ave S # 101  
 City Saint Cloud State MN Zip Code 56301-6218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Christensen Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236335**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Gibbons, Roberta, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15710 Harmony Way  
 City Apple Valley State MN Zip Code 55124-7122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dyste Williams Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236336**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Rhodes, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 Country Club Rd  
 City Rocky Mount State NC Zip Code 27804-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) John Hackney Agency of Rocky Mount Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236338**  
 Amount of Each Receipt this Period  
 120.00  
 Memo Item

**C. Walker, Boris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 E Sharpe St  
 City Statesville State NC Zip Code 28677-5837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Walker Insurance Inc. dba WRC Insuranc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236339**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	670.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Worsham, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13507 Kingsride Lane  
 City Houston State TX Zip Code 77079-3432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shepard & Walton Employee Benefits Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236341**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. McDonough, Kevin, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4001 Asbury Ave 2nd Floor  
 City Tinton Falls State NJ Zip Code 07753-7794  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dickstein Assoc. Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15236344**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Comiskey, Kevin, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brady, Chapman, Holland & Associates, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236351**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Brady, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Senior Vice President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15236352**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Brady, Timothy, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15236353**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15236354**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Chapman, Edwin, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Brady, Chapman, Holland & Associates, Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236356**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Descant, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Brady, Chapman, Holland & Associates, Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236357**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Bradford, Kent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9401 Cedar Lake Ave  
 City Oklahoma City State OK Zip Code 73114-7810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Rich & Cartmill, Inc. Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236358**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Choate, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W Peach St  
 City El Dorado State AR Zip Code 71730-5611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CMI Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236393**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Stuteville, Jo Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 S Webster  
 City Spring Hill State KS Zip Code 66083-8300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elliott Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236396**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Teagarden, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 322 Market  
 City LaCygne State KS Zip Code 66040-0599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Teagarden Ins Group, Inc. dba Linn Cou Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15236397**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Degnan, Carla M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 85 Salem St  
 City Lawrence State MA Zip Code 01843-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Degnan Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236399**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Foley, Daniel, J., , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 91 Cedar Street  
 City Milford State MA Zip Code 01757-1178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Massachusetts Association of Insurance Occupation (for Individual) Vice President of Gov't Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236400**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Gallant, Cathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 975  
 City Acton State MA Zip Code 01720-0975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gallant Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15236401**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2350.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bridges, Billy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 E Kingsmill Ave  
 City Pampa State TX Zip Code 79065-6549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DFB Insurance Group/INSURICA Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237005**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Hogan, Christy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11111 Katy Freeway Suite 800  
 City Houston State TX Zip Code 77079-2118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Associated Insurance Managers Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237011**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Montgomery, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8626 Tesoro Dr Ste 310  
 City San Antonio State TX Zip Code 78217-6217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Whitaker Insurance Associates, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237014**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sorrel, Gordon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 950  
 City El Campo State TX Zip Code 77437-0950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Texas Insurance & Financial Services Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15237016**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Tollett, J.T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 N Shoreline Ste 1200  
 City Corpus Christi State TX Zip Code 78401-0361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Swantner & Gordon Insurance Agency, LL Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15237017**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Whitaker, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8626 Tesoro Dr Ste 310  
 City San Antonio State TX Zip Code 78217-6217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Whitaker Insurance Associates, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : 15237018**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Whitaker, Lana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8626 Tesoro Dr Ste 310  
 City San Antonio State TX Zip Code 78217-6217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Whitaker Insurance Associates, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237019**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**B. Bauer, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brady, Chapman, Holland & Associates, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237021**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Brady, Jeffrey, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brady, Chapman, Holland & Associates, Occupation (for Individual) President/CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 18 / 2017  
**Transaction ID : 15237024**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Clark, Janet, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15237027**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Gerland, Kelly, Wayne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15237030**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

Mailing Address 10055 West Gulf Bank

City Houston	State TX	Zip Code 77040-3119
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Brady, Chapman, Holland & Associates,	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : 15237035**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 93 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mozingo, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 921 S McPherson Church Rd  
 City Fayetteville State NC Zip Code 28303-5368  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Group, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15237117**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Kochenower, Katie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 Kitty Hawk Drive  
 City Windsor State CO Zip Code 80550-3530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Writer Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15237922**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Savage, Cheryl, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Ford Avenue  
 City Wyandotte State MI Zip Code 48192-3826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KSP Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15237930**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Flannagan, Madelyn, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 South Peyton Street

City Alexandria	State VA	Zip Code 22314-2879
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Independent Insurance Agents & Brokers	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

**Transaction ID : 15238650**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Selman, Scott, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2738 E 51st St Ste 400

City Tulsa	State OK	Zip Code 74105-6227
---------------	-------------	------------------------

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

Name of Employer (for Individual) Rich & Cartmill, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

**Transaction ID : 15239577**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 2301 Texas Street

City Lutcher	State LA	Zip Code 70071-5333
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Lanoix Insurance Agency	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

**Transaction ID : 15239591**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Lanoix, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2301 Texas Street  
 City Lutcher State LA Zip Code 70071-5333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lanoix Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15239592**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Lanoix, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2301 Texas Street  
 City Lutcher State LA Zip Code 70071-5333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lanoix Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15239593**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Hower, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 W 4th St  
 City Holton State KS Zip Code 66436-1769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kellerman Insurance, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : 15239594**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Renn, Greg, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Crestway  
 City Wellington State KS Zip Code 67152-3276  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renn & Company, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239596**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Calabrese, Michele, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Farmington Ave  
 City Providence State RI Zip Code 02909-5406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farmington Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239625**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Soforenko, David, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Steeple Ln  
 City Lincoln State RI Zip Code 02865-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Starkweather & Shepley Insurance Broke Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239627**  
 Amount of Each Receipt this Period 499.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1249.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Mendizabal, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 528 Putnam Pike  
 City Greenville State RI Zip Code 02828-3044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Apple Valley Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2017  
**Transaction ID : 15239629**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Stewart, Wyatt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 F Street NW Suite 610  
 City Washington State DC Zip Code 20001-6707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Independent Insurance Agents & Brokers Occupation (for Individual) Senior Director, Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2017  
**Transaction ID : 15239795**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Floyd, Garrett, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 Bullock Blvd  
 City Niceville State FL Zip Code 32578-2732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Niceville Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2017  
**Transaction ID : 15239797**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Atkins, George, L., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 W Main St # 1500

City Louisville	State KY	Zip Code 40202-2927
--------------------	-------------	------------------------

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

Name of Employer (for Individual) R.H. Clarkson Insurance Agency	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239798**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. Corkin, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Wells Avenue Suite 301a

City Newton Center	State MA	Zip Code 02459-3331
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Corkin Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239799**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C. Philbin, Tara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 Broadway Suite 304

City Lynnfield	State MA	Zip Code 01940-2354
-------------------	-------------	------------------------

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

Name of Employer (for Individual) PHILBIN Ins Group/Crowley-Donovan Ins	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239800**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 99 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Wyrsch, Dan, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12800 Long Beach Blvd  
 City Long Beach Township    State NJ    Zip Code 08008-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Van Dyk Group    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239804**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Porch, Davis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 132 E Main St  
 City Waverly    State TN    Zip Code 37185-2143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Porch-Stribling-Webb Insurance    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239806**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Watkins, Rodney, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6474 South Hwy 37  
 City Mineola    State TX    Zip Code 75773-7188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Watkins Insurance Group    Occupation (for Individual) President  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15239808**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Aitkens, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 Branch Ave

City Little Silver	State NJ	Zip Code 07739-1254
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) McCue Insurance Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239809**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B. Shepard, C. Kent, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5801 N 10th Suite 300

City McAllen	State TX	Zip Code 78504-2609
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Shepard Insurance Agency	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239810**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

Mailing Address 2047 SW Topeka Blvd Ste C

City Topeka	State KS	Zip Code 66612-1461
----------------	-------------	------------------------

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

Name of Employer (for Individual) Integrity Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 12 / 20 / 2017  
**Transaction ID : 15239832**

Amount of Each Receipt this Period  
 500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sandrock, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 S Main Street  
 City Tampico State IL Zip Code 61283-7766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cornerstone Agency, Inc. Occupation (for Individual) Agency Principle  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15244294**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Johnson, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4200 Northcorp Pkwy Suite 400  
 City West Palm Beach State FL Zip Code 33410-4314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olympus Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15244866**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Townsend, Deni, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14400 Northbrook Dr # 150  
 City San Antonio State TX Zip Code 78232-5047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Billy Greaves Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15244882**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Hoffman, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 Pleasant St  
 City South Weymouth State MA Zip Code 02190-2526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) A E Barnes Insurance Agcy Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244895**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Seiler, Craig, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11350 Tomahawk Creek Pkwy Suite 200  
 City Leawood State KS Zip Code 66211-2727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Creative Planning Property & Casualty, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244896**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Henry, Ross, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9624 Brookline Ave 2nd Floor  
 City Baton Rouge State LA Zip Code 70809-1461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Henry Insurance Service, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244899**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Lowry, Mark, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 416 Main  
 City Stockton State KS Zip Code 67669-1930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Heritage Insurance Group, Inc. - Stock Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244903**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Lackman, J Phillip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4360 Wabash Ave  
 City Springfield State IL Zip Code 62711-7009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Independent Insurance Agents of Illino Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244907**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Shank, Al, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 W 2nd St  
 City Liberal State KS Zip Code 67901-3718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Al Shank Insurance, Inc. Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244911**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. de Blanc, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4964 Folse Dr  
 City Metairie State LA Zip Code 70006-1156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Continental Insurance Services Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244929**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Greenstein, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21845 Powerline Rd Ste 205  
 City Boca Raton State FL Zip Code 33433-7898  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CKP Insurance, LLC dba Beekeeping Insu Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244931**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Montalvo, Ramon, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 S Texas Blvd  
 City Weslaco State TX Zip Code 78596-6106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Montalvo Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244937**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5800.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Zeigler, F. Brooks, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7180 Hodgson Memorial Dr  
 City Savannah State GA Zip Code 31406-2532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morris & Templeton Insurance Agency, I Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244939**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Wilson, Kristy, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 W 4th St  
 City Holton State KS Zip Code 66436-1769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kellerman Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244940**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Schlitt, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1717 Indian River Blvd Ste 300  
 City Vero Beach State FL Zip Code 32960-0864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Schlitt Insurance Services, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15244941**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Hollis, Robert, L., , Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Village Grn N Ste 121

City Plymouth	State MA	Zip Code 02360-7780
------------------	-------------	------------------------

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

Name of Employer (for Individual) Hollis Insurance Agency, Inc.	Occupation (for Individual) President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2017

**Transaction ID : 15244944**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Sandrock, Gregory, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 S Main Street

City Tampico	State IL	Zip Code 61283-7766
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Cornerstone Agency, Inc.	Occupation (for Individual) Agency Principle
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2017

**Transaction ID : 15244948**

Amount of Each Receipt this Period  
800.00

Memo Item

**C. Gazaway, David, L., , Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 South St

City Bow	State NH	Zip Code 03304-3411
-------------	-------------	------------------------

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

Name of Employer (for Individual) Allied Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2017

**Transaction ID : 15246207**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Chamberlin, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 South Pratten  
 City Columbus State MT Zip Code 59019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mandeville Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017  
**Transaction ID : 15246208**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Hunt, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1784 Sharp Springs Rd  
 City Winchester State TN Zip Code 37398-4658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) V. R. Williams & Company Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2017  
**Transaction ID : 15246215**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Konen, Brian, V., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2570 Beverly Drive Suite 100  
 City Aurora State IL Zip Code 60502-8538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Konen Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2017  
**Transaction ID : 15246222**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Soden, Harold, , , Sr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 W Railroad Ave

City Jamesburg	State NJ	Zip Code 08831-1360
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Oliver L. E. Soden Agency	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2017

**Transaction ID : 15246302**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. Rued, Doug, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 16th Street NW

City Minot	State ND	Zip Code 58703-1415
---------------	-------------	------------------------

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

Name of Employer (for Individual) First Western Insurance	Occupation (for Individual) Senior Vice President
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2017

**Transaction ID : 15246470**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Inman, Michael, G., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 549

City Chinook	State MT	Zip Code 59523-0549
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hub International Mountain States Ltd.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2017

**Transaction ID : 15246477**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Ryan, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 87 Lackawanna Avenue  
 City Totowa State NJ Zip Code 07512-2335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hanson & Ryan Inc. Occupation (for Individual) Per.Lines Processor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2017  
**Transaction ID : 15246480**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Fortner, Heather, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2890 Pinon Frontage Rd  
 City Farmington State NM Zip Code 87402-5033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVI Risk Management - Insurance Broker Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 22 / 2017  
**Transaction ID : 15246481**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Comiskey, Charles, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10055 West Gulf Bank  
 City Houston State TX Zip Code 77040-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brady, Chapman, Holland & Associates, Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 22 / 2017  
**Transaction ID : 15246482**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Worsham, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13507 Kingsride Lane  
 City Houston State TX Zip Code 77079-3432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shepard & Walton Employee Benefits Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2017  
**Transaction ID : 15246483**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Cupp, Jonathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 640  
 City Paragould State AR Zip Code 72451-0640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M. F. Block Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246496**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Greer, Phillip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Southpointe  
 City Paragould State AR Zip Code 72450-6238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M. F. Block Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246497**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 111 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Jackson, Nancy, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 315 N Market St  
 City Benton State AR Zip Code 72015-3734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Roberson & Associates Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246498**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Jech, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4706 S Thompson  
 City Springdale State AR Zip Code 72764-2548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farris Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246499**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Mulhearn, Travis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 801 Parkway  
 City Conway State AR Zip Code 72034-5342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farris Agency, Inc. Occupation (for Individual) Account Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246500**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Nadzam, Andrew, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1305 Stone St  
 City Jonesboro State AR Zip Code 72401-4523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Evins Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246501**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Matthews, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 Sundial Dr  
 City Woodland Park State CO Zip Code 80863-9131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Insurance Center LLC Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246502**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**C. McCormick, David, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 West Main Street  
 City Avon State MA Zip Code 02322-1751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McCormick & Sons Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246506**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 113 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Solberg, CIC, Scot, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 520 W Main  
 City Lewistown State MT Zip Code 59457-2604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lewistown Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246509**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Bushey, David, V., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9394 W Dodge Rd Ste 250  
 City Omaha State NE Zip Code 68114-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marcotte Ins. Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246510**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Deardorff, John, V., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13939 Gold Cr Ste 200  
 City Omaha State NE Zip Code 68144-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peterson Brothers Insurance Occupation (for Individual) Producer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246511**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Loftis, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 W Blackwell Ave  
 City Blackwell State OK Zip Code 74631-2851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Loftis & Wetzel Corporation Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246512**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Webb, Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8030 N Mopac Expwy  
 City Austin State TX Zip Code 78759-8906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CCIM Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246513**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Walsh, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 Hinesburg Road  
 City South Burlington State VT Zip Code 05403-6500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NFP Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246516**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Spharler, Don, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3009 Market St  
 City Pine Bluff State AR Zip Code 71601-6890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) First Arkansas Insurance / Pine Bluff Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246559**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Van Ness, Gregory, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 196 S Fir Street  
 City Ventura State CA Zip Code 93001-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tolman & Wiker Insurance Services, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246562**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Connolly, John, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 College Ave  
 City West Somerville State MA Zip Code 02144-1931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wedgewood-Crane & Connolly Ins Agy Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246574**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 116 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Phipps, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 Main Street  
 City Hopkinton State MA Zip Code 01748-1177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Phipps Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246579**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Beimdiek, George Stephen, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 303 W 3rd St  
 City Carthage State MO Zip Code 64836-1735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beimdiek Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246587**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Grimes Chapman, Marianna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1651 Broadway  
 City Lubbock State TX Zip Code 79401-3120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Grimes Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246594**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Cooper, Kim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 595 Dorset Street # 3  
 PO Box 9230  
 City South Burlington State VT Zip Code 05403-6240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cooper Insurance Services, Ltd. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246599**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Kinney, Kim, K, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 307 Route 2  
 City South Hero State VT Zip Code 05486-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kinney Insurance Agency Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246600**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Greer, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 Pacific Ave # 1000  
 City Tacoma State WA Zip Code 98402-4321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Propel Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017  
**Transaction ID : 15246601**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Burns, Cindy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 South Central Avenue  
 City Marshfield State WI Zip Code 54449-4101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Burns Insurance Agency LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246602**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. England, James, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108 Trivette Drive  
 City Pikeville State KY Zip Code 41501-1343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peoples Insurance Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246654**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Morse, Daniel, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 285 Washington St  
 City North Easton State MA Zip Code 02356-1117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morse Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 15246683**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Thorburn, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1906B E Tyler  
 City Harlingen State TX Zip Code 78550-7109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shepard Walton King Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 1524689**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Koegel, John, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 West Central St  
 City Natick State MA Zip Code 01760-3757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eastern Insurance Group LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 1525264**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Moffitt, Charles, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1221 Sterling Drive  
 City Poplar Bluff State MO Zip Code 63901-3326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morse-Harwell-Jiles Insurance Agency Occupation (for Individual) Agency Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 26 / 2017  
**Transaction ID : 1525265**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Fletcher, Cynthia, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2433 Gulf to Bay Blvd  
 City Clearwater State FL Zip Code 33765-4300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alley Rehbaum & Capes Assurance, Inc. Occupation (for Individual) Chief Operating Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252566**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Wilson, George, G., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Southfork Ctr  
 City Whitley City State KY Zip Code 42653-0159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crabtree-Wilson Ins. Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252568**  
 Amount of Each Receipt this Period  
 350.00  
 Memo Item

**C. Borawski, Robert, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 88 King Street Ste A  
 City Northampton State MA Zip Code 01060-3280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Borawski Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252579**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Ray, David, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 Dodge St  
 City Beverly State MA Zip Code 01915-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leslie S Ray Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252580**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Cole, Michael, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252582**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Della Porta, Veronica, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7807 Baymeadows Rd East Ste 301  
 City Jacksonville State FL Zip Code 32256-9667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Della Porta Group, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252606**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Leedle, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2532 S Old Us Highway 23  
 City Hartland State MI Zip Code 48353-0129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hartland Insurance Agency, Inc. Occupation (for Individual) Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252609**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Newman, Jeffrey, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16030 Ventura Blvd Suite 500  
 City Encino State CA Zip Code 91436-2766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HUB International Insurance Services I Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252839**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Barber, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 87 E Center Street  
 City Spanish Fork State UT Zip Code 84660-2172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Western States Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252840**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 OF 178 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Frisch, Gary, S., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2017		
Mailing Address 2084 S Milwaukee St			<b>Transaction ID : 15252843</b>		
City Denver	State CO	Zip Code 80210-3521	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Stailey Insurance Corporation		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Demarie, Mike, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2017		
Mailing Address 807 W McNeese St			<b>Transaction ID : 15252844</b>		
City Lake Charles	State LA	Zip Code 70605-5425	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Demarie Insurance Agency, Inc.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Van Dam, Dale, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2017		
Mailing Address 1425 Discovery Parkway			<b>Transaction ID : 15252845</b>		
City Wauwatosa	State WI	Zip Code 53226-1337	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) M3 Insurance Solutions, Inc.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 178
<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Syrek, Wayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3851 E Main St  
 City Mesa State AZ Zip Code 85205-8518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Adams Agency, LLC. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252846**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Tatum, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5241 98th Street  
 City Lubbock State TX Zip Code 79424-4494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HeritageRM Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252849**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Gomez, Pam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4112 N Croatan Hwy  
 City Kitty Hawk State NC Zip Code 27949-6075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Towne Insurance Agency, LLC dba Southe Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252851**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Juffer, Gerrit, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 S Main Ave  
 City Wagner State SD Zip Code 57380-2004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Juffer, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252852**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Harper, John, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252854**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Hornung, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 Philadelphia Pike  
 City Wilmington State DE Zip Code 19809-2280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IOA National Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252855**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Armstrong, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 424 E Main Street  
 City Farmington State NM Zip Code 87401-2708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Armstrong Coury Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252856**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Higginbotham, Richard, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1566 Kanawha Blvd E  
 City Charleston State WV Zip Code 25311-2413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) George H. Friedlander Company Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252857**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Hemphill, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21845 Powerline Rd Ste 205  
 City Boca Raton State FL Zip Code 33433-7898  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CKP Insurance, LLC dba Beekeeping Insu Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252862**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Brown, Kenneth, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 707 Pennsylvania Ave Ste 1300

City Altamonte Springs	State FL	Zip Code 32701-6471
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) Insurance By Ken Brown, Inc.	Occupation (for Individual) Agency Principal
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252863**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Grande, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1680 38th St Ste 110

City Boulder	State CO	Zip Code 80301-2611
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Taggart & Associates	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252864**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C. Durban, Paul, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Laurens St SW

City Aiken	State SC	Zip Code 29801-3847
---------------	-------------	------------------------

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

Name of Employer (for Individual) Durban Laird's Inc	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252867**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Van Roekel, Gerald, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 Central Ave SW  
 City Orange City State IA Zip Code 51041-1740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Van Engelenhoven Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252868**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Moon, Jon, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 East Main  
 City Ada State OK Zip Code 74820-5602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Moon-Baker Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252869**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Archambault, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 143 Providence St  
 City Putnam State CT Zip Code 06260-1529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Archambault Insurance Associates Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2017  
**Transaction ID : 15252870**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Armitage, James, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 E Santa Clara Street Suite 120  
 City Arcadia State CA Zip Code 91006-7233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Arroyo Insurance Services, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252871**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Lathrop, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 85 Beach St Bldg A  
 City Westerly State RI Zip Code 02891-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lathrop Insurance, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252872**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Beavers, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2720 N Hemlock Ct # A  
 City Broken Arrow State OK Zip Code 74012-1194  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Arrow Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2017  
**Transaction ID : 15252873**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Greene, Chip, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10739 Deerwood Park Blvd Ste 200

City Jacksonville	State FL	Zip Code 32256-4839
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Greene Hazel Insurance Group, a Divisi	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2017

**Transaction ID : 15252877**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Peak, Jere, D., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 Broad St

City Selma	State AL	Zip Code 36701-4509
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Peak Insurance	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2017

**Transaction ID : 15252878**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Rollins, Markham, F., , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 Westchester Ave Suite N311

City Rye Brook	State NY	Zip Code 10573-1364
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Brown & Brown of NY, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

**Transaction ID : 15252881**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. McCullough, Delrae, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 278 Fairlane Dr  
 City Louisburg State KS Zip Code 66053-4598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elliott Insurance Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15252925**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Toft, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 169 N Main St  
 City Yardley State PA Zip Code 19067-1321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nottingham Agency - Yardville Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15252926**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Shafer, Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Marion St Ste 200  
 City Knoxville State TN Zip Code 37921-6874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shafer Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15252927**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Black, Gary, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1818 E 9th St  
 City Trenton State MO Zip Code 64683-2644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Duvall Roeder & Black Agency Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 12 / 28 / 2017  
**Transaction ID : 15252934**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Vargas, Carlos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1133 Washington St  
 City Dorchester State MA Zip Code 02124-5524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Vargas & Vargas Ins Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 12 / 28 / 2017  
**Transaction ID : 15252937**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. LaRue, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 960 Chambers Blvd  
 City Bardstown State KY Zip Code 40004-2527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 LaRue-Carey Insurance Group, LLC Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 12 / 28 / 2017  
**Transaction ID : 15252939**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Coddington, F. Chandler, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 535 Mountain Ave.  
 WP 518  
 City New Providence State NJ Zip Code 07974-2002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chans Alt. Risk Transfer Ideas, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15252944**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Herschbach, Michael, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9424 Double R Blvd  
 City Reno State NV Zip Code 89521-5977  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Comstock Insurance Agencies, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15253058**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Orvis, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 Ford Avenue  
 City Muscatine State IA Zip Code 52761-5625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cattail Inc dba Lee Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15253059**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bynum, Thad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 Hiwassee St  
 City Clayton State GA Zip Code 30525-0047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bynum Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15253060**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Morris, Kerry, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1122 Laurel Ln  
 City San Luis Obispo State CA Zip Code 93401-5895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morris & Garritano Insurance Agency, I Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15253063**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Salazar, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3025 S Parker Rd # 110  
 City Aurora State CO Zip Code 80014-2914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wave Financial Partners Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2017  
**Transaction ID : 15253064**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 135 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Wyrsch, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12800 Long Beach Blvd  
 City Long Beach Township    State NJ    Zip Code 08008-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Van Dyk Group    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253076**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Bishop, William, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63 Commerce Park Dr  
 City Westerville    State OH    Zip Code 43082-8348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Associated Insurance Agencies Inc.    Occupation (for Individual) President  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253078**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Shepard, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1906B E Tyler  
 City Harlingen    State TX    Zip Code 78550-7109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shepard Walton King Insurance Group    Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253080**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sayles, David, G., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 899 Lincoln Ave  
 City Glen Rock State NJ Zip Code 07452-3225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) D & G Sayles Corporation Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253086**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Blair, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2277 Rte 33 Ste 404 Golden Crest Corporate Center  
 City Hamilton Square State NJ Zip Code 08690-1700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nottingham Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253087**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Ball, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 960 Pier View Dr Ste A  
 City Idaho Falls State ID Zip Code 83402-4918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Buckner Company Occupation (for Individual) Account Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253090**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Woods, John, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Park Avenue  
 City Worcester State MA Zip Code 01605-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thomas J Woods Insurance Agcy Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253091**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Dempsey, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 145 Railroad Avenue  
 City Norwood State MA Zip Code 02062-3525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dempsey Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253092**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Stone, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Veterans Blvd Suite 1420  
 City Metairie State LA Zip Code 70005-3055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stone Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253096**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 OF 178 (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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Ross O'Connell, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 Lower Westfield Rd Ste 2  
 City Holyoke State MA Zip Code 01040-2889  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ross Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253098**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Hirbour, Lisa, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Elm Street  
 City Worcester State MA Zip Code 01608-1713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Feingold- Feingold Ins Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253100**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Capone, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Broad Street  
 City Branchville State NJ Zip Code 07826-5601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Franklin Mutual Insurance Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253103**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. DePaulo, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 175 McClellan Highway Suite 112

City East Boston	State MA	Zip Code 02128-1185
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Meridian Insurance Agency LLC	Occupation (for Individual) President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 12 / 29 / 2017  
**Transaction ID : 15253104**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. Kaplansky, Ely, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 114 Harvard Street

City Brookline	State MA	Zip Code 02446-6420
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Kaplansky Insurance Agcy	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 12 / 29 / 2017  
**Transaction ID : 15253109**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C. Kinkade, Stephen, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 S Main Street

City Leitchfield	State KY	Zip Code 42754-1091
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Kinkade-Cornell Insurance Agency, Inc.	Occupation (for Individual) Insurance Agent
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 1235.00

Date of Receipt  
 12 / 29 / 2017  
**Transaction ID : 15253111**

Amount of Each Receipt this Period  
 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 140 OF 178  
(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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Martin, Mike, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1122 Idaho St  
 City Lewiston State ID Zip Code 83501-1939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Martin Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253112**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Richard, Philip, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 Garden Street Unit 1B  
 City Danvers State MA Zip Code 01923-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Phil Richard Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253113**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Pietro, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 93 Stafford Street  
 City Worcester State MA Zip Code 01603-1459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mid-State Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253114**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 350.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 178
<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Watkins, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1122 Idaho St  
 City Lewiston State ID Zip Code 83501-1939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Martin Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253115**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**B. Polito, Thomas, R., , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 231 Bussey St  
 City Dedham State MA Zip Code 02026-2555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Polito Insurance Agcy Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253116**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Davis, Glen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 981 Worcester Street  
 City Wellesley State MA Zip Code 02482-3716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renaissance Alliance Insurance Service Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253177**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Jones, Wm Keith, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3131 Lonnladh Rd

City Tallahassee	State FL	Zip Code 32308-4255
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Earl Bacon Agency, Inc.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

**Transaction ID : 15253178**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Lewis, David, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10692 Medlock Bridge Rd Ste 200

City Johns Creek	State GA	Zip Code 30097-8497
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Partners Risk Services, LLC	Occupation (for Individual) Insurance Agent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

**Transaction ID : 15253179**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Crawford, Allen, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 445 S Hwy 27 Suite 201

City Somerset	State KY	Zip Code 42501-3445
------------------	-------------	------------------------

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

Name of Employer (for Individual) Reed Brothers Insurance Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

**Transaction ID : 15253181**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Robertson, Ray, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 Broadway  
 City Mount Sterling State KY Zip Code 40353-1301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Limestone Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253185**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Evans, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 N Mill St  
 City Pryor State OK Zip Code 74361-2422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brown & Brown Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253193**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Ashy, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3108 N Lamar Ste 201  
 City Austin State TX Zip Code 78705-2013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shepard Walton King Insurance Group Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253197**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Bridges, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5625 Fulton Dr  
 City Amarillo State TX Zip Code 79109-4212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Duncan Fraser & Bridges Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253198**  
 Amount of Each Receipt this Period  
 1200.00  
 Memo Item

**B. Abbott, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 705 Ridge Rd  
 City Lyndhurst State NJ Zip Code 07071-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Abbott Insurance Agency Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253201**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Russell, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2214 Avenue H  
 City Rosenberg State TX Zip Code 77471-2636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 NewFirst Insurance Services, Inc. Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : 15253238**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 145 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Steele, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6730 Charlotte Pike  
 City Nashville State TN Zip Code 37209-4204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Martin & Zerfoss, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253240**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Meinberg, Chris, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1396 Westgate Center Dr  
 City Winston Salem State NC Zip Code 27103-2932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Phoenix Company Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253242**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Hanson, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5317 West Grande Market Drive Suite E  
 City Appleton State WI Zip Code 54913-8465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hanson Benefits, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253243**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. West, Scott, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1160 Dairy Ashford # 220  
 City Houston State TX Zip Code 77079-3010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pathfinder/LL&D Insurance Group LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253245**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Dowd, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Bobala Rd  
 City Holyoke State MA Zip Code 01040-9402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Dowd Agencies LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253246**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Atkins, George, L., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 W Main St # 1500  
 City Louisville State KY Zip Code 40202-2927  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) R.H. Clarkson Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253248**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 147 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Rucker, Russell, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 314 Ninth Street  
 City Huntington State WV Zip Code 25701-1436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rucker, Billups & Fowler, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253255**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Bowman, Edward, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1000 E Warrenville Rd Ste 101  
 City Naperville State IL Zip Code 60563-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wine Sergi & Co., LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253257**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Sartori, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 76 Bedford St Ste 37  
 City Lexington State MA Zip Code 02420-4641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sartori Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253262**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sartori, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 76 Bedford St Ste 37  
 City Lexington State MA Zip Code 02420-4641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sartori Insurance Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253263**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Grant, Richard, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 S Main St  
 City Barnegat State NJ Zip Code 08005-2352  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) W. B. Grant Agency, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253265**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Poleman, Steve, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253266**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Swenton, Michael, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2738 E 51st St Ste 400  
 City Tulsa State OK Zip Code 74105-6227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rich & Cartmill, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253267**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Pennington, Donald Ray, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 Jere Ford Memorial Hwy  
 City Dyersburg State TN Zip Code 38024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tigrett & Pennington, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253268**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Morriss, Don, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 Pine St  
 City Texarkana State TX Zip Code 75501-5515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Offenhauser & Co Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253269**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 178
<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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Waldman, Stephen, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6200 LBJ Freeway Ste 200  
 City Dallas State TX Zip Code 75240-6359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Waldman Bros, LLP Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253270**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Gallant, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 199 Great Road  
 City Acton State MA Zip Code 01720-5759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gallant Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253291**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Vaughn, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1117 Thomasville Rd  
 City Tallahassee State FL Zip Code 32303-6223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rogers, Gunter, Vaughn Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : 15253293**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 151 OF 178  
(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)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Toole, John, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 319  
 City Lee State MA Zip Code 01238-0319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) L V Toole Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253294**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Leahy, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 535 Allen St Ste 1  
 City Springfield State MA Zip Code 01118-2067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leahy-Brown Insurance & Realty, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253297**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Leahy, Joseph, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 535 Allen St Ste 1  
 City Springfield State MA Zip Code 01118-2067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leahy & Brown Insurance & Realty, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15253298**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Fyntrilakis, Nick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 91 Cedar Street  
 City Milford State MA Zip Code 01757-1178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Massachusetts Association of Insurance Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1758.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253299**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Sykora, Dee, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11815 M Street # 200  
 City Omaha State NE Zip Code 68137-2232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quinn Insurance, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253300**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**C. Nicolopoulos, Christopher, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Garvins Falls Rd  
 City Concord State NH Zip Code 03301-5174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Hampshire Association of Insurance Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15253309**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1225.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Speight, Brent, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 408 N Sturgeon St  
 City Montgomery City State MO Zip Code 63361-1827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Scott Agency Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2017  
**Transaction ID : 15255170**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Eagan, Marc, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 8590  
 City Metairie State LA Zip Code 70011-8590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eagan Insurance Agency, LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2017  
**Transaction ID : 15255171**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Baker, Gregory, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61 Cordova Street  
 City Saint Augustine State FL Zip Code 32084-3630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ThompsonBaker Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15269043**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Lewis, E Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 Gill Street Suite 5500  
 City Woburn State MA Zip Code 01801-1728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USI Insurance Services LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269046**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Magowan, Jeffrey, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 823 Ludington St  
 City Escanaba State MI Zip Code 49829-3803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Garceau Insurance Agency Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269047**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Haskell, John, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 169 Main St  
 City Oneida State NY Zip Code 13421-1640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OneGroup NY, Inc. (Oneida) Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269049**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Shipman, John, K, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 764 Bessemer St Ste 101  
 City Meadville State PA Zip Code 16335-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) First National Insurance Agency LLC Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269051**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Berry, Matt, , , Sr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1221 S Mo Pac Expressway Suite 160  
 City Austin State TX Zip Code 78746-6822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William Gammon Insurance Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269053**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Gammon, William, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1221 S Mo Pac Expressway Suite 160  
 City Austin State TX Zip Code 78746-6822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William Gammon Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269054**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Carroll, David, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14906 FM 529 Rd  
 City Houston State TX Zip Code 77095-3296  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carroll Insurance Agency, Ltd. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269055**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Henry, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8144 Walnut Hill Ln 16th Floor  
 City Dallas State TX Zip Code 75231-4388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marsh & McLennan Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269057**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Anderson, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2525 21st Avenue South Suite 200  
 City Nashville State TN Zip Code 37212-5627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Anderson Benson Insurance Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269058**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Sain, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 West Market St  
 City Bolivar State TN Zip Code 38008-1819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bolivar Insurance & Real Estate Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15269059**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Smith, Dixie, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 114 N Main Ave  
 City Fayetteville State TN Zip Code 37334-3056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dixie Smith Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15269060**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Connulty, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 388 County St  
 City New Bedford State MA Zip Code 02740-4992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Paul & Dixon Insurance Agency , Inc Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2017  
**Transaction ID : 15269082**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 158 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Belken, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8626 Tesoro Drive Suite 310  
 City San Antonio State TX Zip Code 78217-6217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Belken Insurance Associates Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2017  
**Transaction ID : 15269083**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Canchola, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8560 Jefferson Hwy  
 City Baton Rouge State LA Zip Code 70809-2230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blumberg and Associates, Inc. Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1785.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15280178**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Luebbering, Dennis, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2717 Industrial Dr Ste A  
 City Jefferson City State MO Zip Code 65109-0887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Luebbering Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 15 / 2017  
**Transaction ID : 15280180**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 159 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Lanoix, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2301 Texas Street  
 City Lutcher State LA Zip Code 70071-5333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lanoix Insurance Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : 15328142**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
 Refund(s) on Schedule B Totaling \$1000.00 This changes the YTD Total to \$1000.00

**B. Nicolopoulos, Christopher, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Garvins Falls Rd  
 City Concord State NH Zip Code 03301-5174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Hampshire Association of Insurance Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2017  
**Transaction ID : 15328143**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
 Refund(s) on Schedule B Totaling \$600.00 This changes the YTD Total to \$500.00

**C. Soforenko, David, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Steeple Ln  
 City Lincoln State RI Zip Code 02865-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Starkweather & Shepley Insurance Broke Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 21 / 2017  
**Transaction ID : 15328144**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
 Refund(s) on Schedule B Totaling \$499.00 This changes the YTD Total to \$0.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	164639.01

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Paypal Inc.**

Mailing Address 1840 Embarcadero Rd

City Palo Alto

State CA

Zip Code 94303

Purpose of Disbursement  
CREDIT CARD PROCESSING CHARGE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2017			

FEC Identification Number

C [ ]

**Transaction ID : 15328092**

Amount of Each Disbursement this Period

[ ] 89.90

Memo Item CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

**B. Suntrust Merchant Services**

Mailing Address P.O. Box 6600

City Hagerstown

State MD

Zip Code 21741

Purpose of Disbursement  
CREDIT CARD PROCESSING CHARGE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2017			

FEC Identification Number

C [ ]

**Transaction ID : 15328093**

Amount of Each Disbursement this Period

[ ] 1709.28

Memo Item CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 1799.18

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

[ ] 1799.18



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Duffy For Wisconsin**

Mailing Address PO Box 538

City  
Wausau

State  
WI

Zip Code  
54402

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Duffy, Sean, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: WI

District: 07

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C C00464339

**Transaction ID : 15206228**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JOE PAC**

Mailing Address 415 New Jersey Ave, SE Unit 1

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C

**Transaction ID : 15206230**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Oorah! PAC**

Mailing Address 526 6th Street SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C

**Transaction ID : 15206231**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Strategy PAC**

Mailing Address 138 CONANT STREET

City Beverly State MA Zip Code 01915

Purpose of Disbursement

Category/  
Type

Candidate Name

**Strategy PAC**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206232**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Capuano For Congress Committee**

Mailing Address PO Box 440305

City Somerville State MA Zip Code 2144

Purpose of Disbursement

Category/  
Type

Candidate Name

**Capuano, Michael, E., Rep.,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify)

State: MA District: 07

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206233**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. First in Freedom PAC**

Mailing Address 412 S. Capitol Street, Suite B

City Washington State DC Zip Code 20003

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206234**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Jeff Duncan For Congress**

Mailing Address PO Box 845

City Laurens State SC Zip Code 29360

Purpose of Disbursement

011

Category/Type

Candidate Name  
**Duncan, Jeff, , ,**

Office Sought:  House  Senate  President  
State: SC District: 03

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C C00460550

**Transaction ID : 15206235**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. WOLF PAC**

Mailing Address 413 New Jersey Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C

**Transaction ID : 15206236**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Peter Norbeck Leadership PAC**

Mailing Address P.O. Box 477

City Pierre State SD Zip Code 57501

Purpose of Disbursement

011

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C

**Transaction ID : 15206237**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Rounds For Senate**

Mailing Address PO Box 250

City Pierre State SD Zip Code 57501

Purpose of Disbursement

Category/  
Type

Candidate Name

**Rounds, Mike, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: SD District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206238**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. George Holding For Congress Inc.**

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

Category/  
Type

Candidate Name

**Holding, George, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NC District: 02

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206239**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fostering Progress PAC**

Mailing Address 499 South Capitol Street, SW Ste 4

City Washington State DC Zip Code 20003

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15206241**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. French Hill For Arkansas**

Mailing Address PO Box 7841

City  
Little Rock

State  
AR

Zip Code  
72217

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Hill, French, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: AR District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2017

FEC Identification Number

C C00551275

**Transaction ID : 15221437**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Moore For Congress**

Mailing Address PO Box 16646

City  
Milwaukee

State  
WI

Zip Code  
53216

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Moore, Gwendolynne, S., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: WI District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2017

FEC Identification Number

C C00397505

**Transaction ID : 15221438**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hoosiers First PAC**

Mailing Address P.O. Box 772

City  
Indianapolis

State  
IN

Zip Code  
46206

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2017

FEC Identification Number

C

**Transaction ID : 15221439**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. CMR PAC**

Mailing Address P.O. Box 2485

City  
Springfield

State  
VA

Zip Code  
22152

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2017			

FEC Identification Number

C

Transaction ID : 15221440

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jose Javier Rodriguez For Congress**

Mailing Address PO Box 350162

City  
Miami

State  
FL

Zip Code  
33135

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rodriguez, Jose, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  Primary  General  
 Other (specify)

State: FL District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2017			

FEC Identification Number

C C00650515

Transaction ID : 15225966

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Comstock For Congress**

Mailing Address PO Box 831

City  
Mc Lean

State  
VA

Zip Code  
22101

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Comstock, Barbara, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2017			

FEC Identification Number

C C00554261

Transaction ID : 15226312

Amount of Each Disbursement this Period

3000.00
---------

Memo Item

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

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

13000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. New Pioneer PAC**

Mailing Address 213 Ashby Street

City Alexandria State VA Zip Code 22305

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15233437**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Joe Wilson For Congress**

Mailing Address PO Box 2145

City West Columbia State SC Zip Code 29171

Purpose of Disbursement

Category/  
Type

Candidate Name

**Wilson, Joe, , Rep.,**

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: SC District: 02

Date of Disbursement

/  /

FEC Identification Number

C00368522  
**Transaction ID : 15239457**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. AXPAC**

Mailing Address 8401 Excelsior Drive #103

City Madison State WI Zip Code 53717

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15239458**  
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Friends Of Mia Love**

Mailing Address PO Box 255

City  
Riverton

State  
UT

Zip Code  
84065

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Love, Mia, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00505776

**Transaction ID : 15239459**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brian Fitzpatrick For Congress**

Mailing Address PO Box 939

City  
Langhorne

State  
PA

Zip Code  
19047

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Fitzpatrick, Brian, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: PA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00607416

**Transaction ID : 15239460**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Young For Iowa, Inc.**

Mailing Address PO Box 162

City  
Van Meter

State  
IA

Zip Code  
50261

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Young, David, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00545616

**Transaction ID : 15239461**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Kansans For Marshall**

Mailing Address PO Box 1588

City  
Great Bend

State  
KS

Zip Code  
67530

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Marshall, Roger, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: KS District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00576173

**Transaction ID : 15239462**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregg Harper For Congress**

Mailing Address Post Office Box 54344

City  
Pearl

State  
MS

Zip Code  
39288

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Harper, Gregg, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: MS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00441295

**Transaction ID : 15239463**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Maloney For Congress**

Mailing Address 24 East 93rd Street, 4b

City  
New York

State  
NY

Zip Code  
10128

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Maloney, Carolyn, B., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00273169

**Transaction ID : 15239602**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

6500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Cory Booker For Senate**

Mailing Address PO Box 15293

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Booker, Cory, A., Sen.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2020

Primary  General  
 Other (specify) ▼

State: NJ

District:

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00540500

**Transaction ID : 15239603**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Montanans For Tester**

Mailing Address PO Box 1135

City  
Helena

State  
MT

Zip Code  
59624

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Tester, Jon, , Sen.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify)

State: MT

District:

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00412304

**Transaction ID : 15239604**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Swalwell For Congress**

Mailing Address P.O. Box 2847

City  
Dublin

State  
CA

Zip Code  
94568

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Swalwell, Eric, M., Rep.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: CA

District: 15

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00502294

**Transaction ID : 15239605**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Josh Gottheimer For Congress**

Mailing Address PO Box 584

City  
Ridgewood

State  
NJ

Zip Code  
7451

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Gottheimer, Joshua, S., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20								

FEC Identification Number

C C00573949

**Transaction ID : 15239606**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walberg For Congress**

Mailing Address PO Box 1362

City  
Jackson

State  
MI

Zip Code  
49204

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Walberg, Tim, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify)

State: MI District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20								

FEC Identification Number

C C00390724

**Transaction ID : 15239607**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kustoff For Congress**

Mailing Address 1661 Aaron Brenner Dr  
Ste 300

City  
Memphis

State  
TN

Zip Code  
38120

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Kustoff, David, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20								

FEC Identification Number

C C00614826

**Transaction ID : 15239608**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Steve Daines For Montana**

Mailing Address PO Box 1598

City  
Helena

State  
MT

Zip Code  
59624

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Daines, Steve, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: MT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

**C** C00491357

**Transaction ID : 15239609**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Collins For Congress**

Mailing Address PO Box 1295

City  
Gainesville

State  
GA

Zip Code  
30503

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Collins, Doug, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: GA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

**C** C00502039

**Transaction ID : 15239610**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Jersey Values PAC**

Mailing Address 219 Pennsylvania Ave, SE 3rd Floor

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

**C**

**Transaction ID : 15239611**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

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

3000.00
---------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Roskam For Congress Committee**

Mailing Address P. O. Box 713

City  
Wheaton

State  
IL

Zip Code  
60187

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Roskam, Peter, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00410969

**Transaction ID : 15239612**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Roskam For Congress Committee**

Mailing Address P. O. Box 713

City  
Wheaton

State  
IL

Zip Code  
60187

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Roskam, Peter, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00410969

**Transaction ID : 15239613**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Buddy Carter For Congress**

Mailing Address PO Box 10570

City  
Savannah

State  
GA

Zip Code  
31412

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Carter, Buddy, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: GA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00543967

**Transaction ID : 15239614**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Walters For Congress**

Mailing Address 9070 Irvine Center Drive, #150

City Irvine State CA Zip Code 92618

Purpose of Disbursement

011

Category/Type

Candidate Name

**Walters, Mimi, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CA District: 45

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00546853

**Transaction ID : 15239616**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Coffman For Congress**

Mailing Address 4950 S Yosemite Street F2 #511

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement

011

Category/Type

Candidate Name

**Coffman, Mike, , Rep.,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CO District: 06

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00497180

**Transaction ID : 15239617**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Heller For Senate**

Mailing Address PO Box 371907

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

011

Category/Type

Candidate Name

**Heller, Dean, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C00494229

**Transaction ID : 15239618**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

8500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

### A. Denny Heck For Congress

Mailing Address PO Box 235

City Olympia

State WA

Zip Code 98507

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Heck, Denny, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00472159

**Transaction ID : 15239619**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

### B. Making America Prosperous

Mailing Address PO Box 2485

City Springfield

State VA

Zip Code 22152

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Making America Prosperous**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C C00445379

**Transaction ID : 15239620**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

### C. Dakota Prairie PAC

Mailing Address 303 Massachusetts Ave, NE

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2017

FEC Identification Number

C

**Transaction ID : 15239621**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

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

6000.00
---------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Families For James Lankford**

Mailing Address PO Box 1639

City  
Bethany

State  
OK

Zip Code  
73008

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For: 2017

Primary  General  
 Other (specify) ▼

State: OK

District:

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C [ ]

Transaction ID : 15239622

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brave PAC**

Mailing Address 499 South Capitol Street, SW Suite

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C [ ]

Transaction ID : 15239623

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott Taylor For Congress**

Mailing Address 2100 Mediterranean Avenue  
#247

City  
Virginia Beach

State  
VA

Zip Code  
23451

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Taylor, Scott, , ,

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: VA

District: 02

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2017

FEC Identification Number

C C00468264

Transaction ID : 15239624

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

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

[ ] 6000.00

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

[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

**A. Montanans For Tester**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1135

City Helena State MT Zip Code 59624

Purpose of Disbursement  011 Category/Type

Candidate Name  
**Tester, Jon, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MT District:

Date of Disbursement: 12 / 29 / 2017

FEC Identification Number: C 000412304  
Transaction ID : 15253105  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	96000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)**

Full Name (Last, First, Middle Initial)

**A. Lanoix, Bryan, , ,**

Mailing Address 2301 Texas Street

City  
Lutcher

State  
LA

Zip Code  
70071-5333

Purpose of Disbursement  
Refund of Individual Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15239598**

Amount of Each Disbursement this Period

Refund of Individual Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Soforenko, David, B., ,**

Mailing Address 26 Steeple Ln

City  
Lincoln

State  
RI

Zip Code  
02865-4831

Purpose of Disbursement  
Refund of Individual Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15244897**

Amount of Each Disbursement this Period

Refund of Individual Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nicolopoulos, Christopher, R., ,**

Mailing Address 6 Garvins Falls Rd

City  
Concord

State  
NH

Zip Code  
03301-5174

Purpose of Disbursement  
Refund of Individual Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 15277324**

Amount of Each Disbursement this Period

Refund of Individual Contribution

Memo Item

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

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