

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

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="2012"/>	<input type="text" value="98749.50"/>	<input type="text" value="98749.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41098.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19770.63"/>	<input type="text" value="362651.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="60869.22"/>	<input type="text" value="461401.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="57436.84"/>	<input type="text" value="457969.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3432.38"/>	<input type="text" value="3432.38"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

National Association of Mutual Insurance Companies PAC

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).....	9519.33	236358.91
(ii) Unitemized	2751.30	85892.23
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12270.63	322251.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	38750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19770.63	361001.14
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	1556.52
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	94.24
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))..... ▶	19770.63	362651.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19770.63	362651.90

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	586.84	2306.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	586.84	2306.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38500.00	418500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2412.43
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2412.43
29. Other Disbursements	18350.00	34750.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	57436.84	457969.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57436.84	457969.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	19770.63	361001.14
34. Total Contribution Refunds (from Line 28(d))	0.00	2412.43
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19770.63	358588.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	586.84	2306.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1556.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	586.84	750.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. John S. Benson
 Full Name (Last, First, Middle Initial)
 Mailing Address One Mutual Avenue
 City Frankenmuth State MI Zip Code 48787-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Frankenmuth Mutual Insurance Company Occupation President, CEO & Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2423.19

Date of Receipt 10 / 12 / 2012
Transaction ID : A18910270599D4078B76
 Amount of Each Receipt this Period 115.39

B. Ms. Deborah Betten
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City Bel Air State MD Zip Code 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harford Mutual Insurance Company Occupation Claims Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt 10 / 17 / 2012
Transaction ID : A63066E25F31D4E49BAD
 Amount of Each Receipt this Period 10.64

C. Mr. Samuel T. Broomer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7580 North Dobson Rd
 City Scottsdale State AZ Zip Code 85256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Identity Theft 911 Occupation Vice President, Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 10 / 2012
Transaction ID : A07C42F6C6A9B4C169EC
 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional).....▶	326.03
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 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Ms. Heather Brown
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 111

City	State	Zip Code
Bucyrus	OH	44820-0111

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

Name of Employer	Occupation
Ohio Mutual Insurance Company	Bill Service Center 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
10	/	10	/	2012

Transaction ID : AFC49C64EB29A48219E5

Amount of Each Receipt this Period
5.00

B. Mr. John S. Case
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6927

City	State	Zip Code
Richmond	VA	23230-0927

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

Name of Employer	Occupation
Mutual Assurance Society of Virginia	Secretary/Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2012

Transaction ID : ABB5F4C73234541518E7

Amount of Each Receipt this Period
250.00

C. Mr. Charles M. Chamness
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 68700

City	State	Zip Code
Indianapolis	IN	46268-0700

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

Name of Employer	Occupation
National Association of Mutual Insuran	President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2012

Transaction ID : AF2B64C2812AC43968DA

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 9 OF 50
<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Mark Coe
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 111

City	State	Zip Code
Bucyrus	OH	44820-0111

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

Name of Employer	Occupation
Ohio Mutual Insurance Company	IT Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **777.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2012

Transaction ID : A3B68F5EE8FB1474A948

Amount of Each Receipt this Period

92.48

B. Ms. Cynthia Delong
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1776

City	State	Zip Code
Yarmouth	ME	04096-1776

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

Name of Employer	Occupation
Patriot Insurance Company	Vice President, Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2012

Transaction ID : AAAD4E804D0E24FEFB83

Amount of Each Receipt this Period

10.00

c. Mr. Robert Detlefsen PhD
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 68700

City	State	Zip Code
Indianapolis	IN	46268-0700

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

Name of Employer	Occupation
National Association of Mutual Insuran	Vice President - Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **739.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2012

Transaction ID : A682CA2D7E40A4F619C7

Amount of Each Receipt this Period

43.48

SUBTOTAL of Receipts This Page (optional).....▶	92.48
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 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Christian Drusano
Full Name (Last, First, Middle Initial)
Mailing Address 200 N Main St
City Bel Air State MD Zip Code 21014-3544
FEC ID number of contributing federal political committee. **C**
Name of Employer Harford Mutual Insurance Company Occupation Marketing Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **238.11**

Date of Receipt **10 / 17 / 2012**
Transaction ID : A9D8B010950504B9394B
Amount of Each Receipt this Period **15.87**

B. Mr. Gregg A. Dykstra J.D.
Full Name (Last, First, Middle Initial)
Mailing Address 3601 Vincennes Rd
City Indianapolis State IN Zip Code 46268-1154
FEC ID number of contributing federal political committee. **C**
Name of Employer National Association of Mutual Insuran Occupation Chief Operating Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1998.20**

Date of Receipt **10 / 05 / 2012**
Transaction ID : ADE0712AA635644AF9B3
Amount of Each Receipt this Period **96.16**

c. Mr. Fred A. Edmond CPCU, CIC
Full Name (Last, First, Middle Initial)
Mailing Address One Mutual Avenue
City Frankenmuth State MI Zip Code 48787-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Frankenmuth Mutual Insurance Company Occupation Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **807.87**

Date of Receipt **10 / 12 / 2012**
Transaction ID : AE964EB8001404DC68DA
Amount of Each Receipt this Period **38.47**

SUBTOTAL of Receipts This Page (optional)..... **150.50**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Stephen F. Fabian
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City State Zip Code
 Bel Air MD 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Harford Mutual Insurance Company Assistant Vice President - Information
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 666.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012
Transaction ID : A3A808EAF5A8D44A799A
 Amount of Each Receipt this Period
 111.11

B. Mr. Clarence Finleyson
 Full Name (Last, First, Middle Initial)
 Mailing Address One Mutual Avenue
 City State Zip Code
 Frankenmuth MI 48787-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Frankenmuth Mutual Insurance Company Vice President, Human Resources
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2012
Transaction ID : A0B7ED39762A14A4A89C
 Amount of Each Receipt this Period
 10.00

C. Mr. Bernard M. Flynn
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 Sullivan Way
 City State Zip Code
 West Trenton NJ 08628-0227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 New Jersey Manufacturers Insurance Com President & CEO
 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
 10 / 17 / 2012
Transaction ID : A413FDAB3F90B45B2B6B
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1121.11
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 12 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Vincent Franz
Full Name (Last, First, Middle Initial)

Mailing Address 1 Insurance Sq

City State Zip Code
Celina OH 45822-1659

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

Name of Employer Occupation
National Mutual Insurance Company Vice President, Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 12 / 2012
Transaction ID : AFCFA2503BC484C05A64

Amount of Each Receipt this Period
10.00

B. Mr. Matt Gannon
Full Name (Last, First, Middle Initial)

Mailing Address 122 C St NW Ste 540

City State Zip Code
Washington DC 20001-2102

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

Name of Employer Occupation
National Association of Mutual Insuran Assistant Vice President Federal Affai

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 05 / 2012
Transaction ID : AC884D20B4B354A4FB6C

Amount of Each Receipt this Period
20.00

C. Mr. Bryan Gilleland
Full Name (Last, First, Middle Initial)

Mailing Address One Mutual Avenue

City State Zip Code
Frankenmuth MI 48787-0001

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

Name of Employer Occupation
Frankenmuth Mutual Insurance Company Vice President, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
807.87

Date of Receipt
10 / 12 / 2012
Transaction ID : A95FC611699514697BDD

Amount of Each Receipt this Period
38.47

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.47

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 13 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. John Goodin
Full Name (Last, First, Middle Initial)
Mailing Address 200 N Main St
City Bel Air State MD Zip Code 21014-3544
FEC ID number of contributing federal political committee. **C**
Name of Employer Harford Mutual Insurance Company Occupation Underwriting Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **238.11**

Date of Receipt **10 / 17 / 2012**
Transaction ID : A1385EED5D3114D4493A
Amount of Each Receipt this Period **15.87**

B. Mr. Jimi Grande
Full Name (Last, First, Middle Initial)
Mailing Address 122 C St NW Ste 540
City Washington State DC Zip Code 20001-2102
FEC ID number of contributing federal political committee. **C**
Name of Employer National Association of Mutual Insuran Occupation Senior Vice President-Federal and Poli
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1921.85**

Date of Receipt **10 / 05 / 2012**
Transaction ID : AE601FA090A454797AD2
Amount of Each Receipt this Period **113.05**

C. Ms. Susan E. Haack
Full Name (Last, First, Middle Initial)
Mailing Address 471 E Broad St
City Columbus State OH Zip Code 43215-3842
FEC ID number of contributing federal political committee. **C**
Name of Employer Motorists Mutual Insurance Company Occupation Senior Vice President and Corporate Se
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 10 / 2012**
Transaction ID : AB16B1A61E9F549F0B3A
Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **628.92**
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 14 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. F. Timothy Hegarty Jr., CPCU
 Full Name (Last, First, Middle Initial)
 Mailing Address 222 Ames St
 City Dedham State MA Zip Code 02026-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Norfolk & Dedham Mutual Fire Insurance President & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : A6F4E12FAB2DC4467BC4
 Amount of Each Receipt this Period
 20.00

B. Mr. Marcus E. Hill
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 88
 City Fort Worth State TX Zip Code 76101-0088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Agricultural Workers Mutual Auto Insur Chairman & 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
 10 / 03 / 2012
Transaction ID : A7EAAB37E8DCD4E2298C
 Amount of Each Receipt this Period
 250.00

C. Mr. David F. Honold
 Full Name (Last, First, Middle Initial)
 Mailing Address One Mutual Avenue
 City Frankenmuth State MI Zip Code 48787-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Frankenmuth Mutual Insurance Company Senior Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2012
Transaction ID : AF5CED28F8E8145F68F2
 Amount of Each Receipt this Period
 76.93

SUBTOTAL of Receipts This Page (optional).....▶	346.93
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 15 OF 50
	<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

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)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)
A. Mr. Richard Hughes

Mailing Address 200 N Main St

City State Zip Code
Bel Air MD 21014-3544

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

Name of Employer Occupation
Harford Mutual Insurance Company Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.11

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : A5BF1FC835C544244BCC

Amount of Each Receipt this Period
15.87

Full Name (Last, First, Middle Initial)
B. Mr. Timothy R. Hyle CPA

Mailing Address 1 Preferred Way

City State Zip Code
New Berlin NY 13411-1896

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

Name of Employer Occupation
Preferred Mutual Insurance Company Director of Finance

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
10 / 10 / 2012

Transaction ID : A07668F5E3EC04CB490E

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Theresa Jakubick

Mailing Address PO Box 111

City State Zip Code
Bucyrus OH 44820-0111

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

Name of Employer Occupation
Ohio Mutual Insurance Company Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2012

Transaction ID : AE51F771193F447BCB55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	85.87
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 16 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Frank P. Kellner III
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City Bel Air State MD Zip Code 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harford Mutual Insurance Company Occupation Vice President, Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.32

Date of Receipt 10 / 17 / 2012
Transaction ID : AE28D0E1B26CB49ED963
 Amount of Each Receipt this Period 55.56

B. Mr. Vaughn Kidd
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City Bel Air State MD Zip Code 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harford Mutual Insurance Company Occupation Supervising Underwriter
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.11

Date of Receipt 10 / 17 / 2012
Transaction ID : AA6C7711F5D30460487C
 Amount of Each Receipt this Period 15.87

C. Mr. Jeffrey Lopata
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Preferred Way
 City New Berlin State NY Zip Code 13411-1896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Preferred Mutual Insurance Company Occupation Manager - Commercial Lines E-Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 10 / 2012
Transaction ID : A799034876F054E54B72
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional).....▶ 111.43
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 17 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Ms. Rae Malesh
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 68700

City Indianapolis	State IN	Zip Code 46268-0700
FEC ID number of contributing federal political committee. C		
Name of Employer National Association of Mutual Insuran	Occupation Assistant to the President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Date of Receipt
10 / 05 / 2012
Transaction ID : **A436E2AA11D6F46FEA7E**
Amount of Each Receipt this Period
13.50

B. Mr. Phil McCain
Full Name (Last, First, Middle Initial)
Mailing Address One Mutual Avenue

City Frankenmuth	State MI	Zip Code 48787-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Frankenmuth Mutual Insurance Company	Occupation Vice President, IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.87	

Date of Receipt
10 / 12 / 2012
Transaction ID : **A37481271741942D68DC**
Amount of Each Receipt this Period
38.47

C. Mr. Brian S. McLeod
Full Name (Last, First, Middle Initial)
Mailing Address One Mutual Avenue

City Frankenmuth	State MI	Zip Code 48787-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Frankenmuth Mutual Insurance Company	Occupation Vice President, Secretary & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.87	

Date of Receipt
10 / 12 / 2012
Transaction ID : **A92694CE87D924FE8B53**
Amount of Each Receipt this Period
38.47

SUBTOTAL of Receipts This Page (optional).....▶	90.44
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 50
	<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)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial) A. Mr. David Middleton		Date of Receipt
Mailing Address PO Box 68700		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Indianapolis	IN	46268-0700
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A3FFD9E2101B84496B68
Name of Employer	Occupation	Amount of Each Receipt this Period
National Association of Mutual Insuran	Vice President - Finance	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Dona L. Mohr		Date of Receipt
Mailing Address 1725 Hopley Ave		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bucyrus	OH	44820-3569
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AC9E7E18E786C495082B
Name of Employer	Occupation	Amount of Each Receipt this Period
Ohio Mutual Insurance Company	Assistant Vice President-Quality Servi	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="755.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Matt Moreau		Date of Receipt
Mailing Address 200 N Main St		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bel Air	MD	21014-3544
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AB3E529FD8DC34C3FB57
Name of Employer	Occupation	Amount of Each Receipt this Period
Harford Mutual Insurance Company	Property Claims Supervisor	<input type="text" value="10.32"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="204.76"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 50
	<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)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)
A. Ms. Karlyn T. Myers

Mailing Address 1 Preferred Way

City State Zip Code
New Berlin NY 13411-1896

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

Name of Employer Occupation
Preferred Mutual Insurance Company Vice President, Corporate Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2012

Transaction ID : A7B65AC20156F4E8AB92

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Mr. Robert F. Ohler

Mailing Address 200 N Main St

City State Zip Code
Bel Air MD 21014-3544

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

Name of Employer Occupation
Harford Mutual Insurance Company Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
766.67

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : AFD99CA39F99C4935A3B

Amount of Each Receipt this Period
111.11

Full Name (Last, First, Middle Initial)
C. Ms. Angela Panowicz

Mailing Address 200 N Main St

City State Zip Code
Bel Air MD 21014-3544

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

Name of Employer Occupation
Harford Mutual Insurance Company Underwriting Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
571.45

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : A083DA7CE3F894FD2815

Amount of Each Receipt this Period
38.09

SUBTOTAL of Receipts This Page (optional)..... ▶ 229.20

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 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. John A. Paul PFMM
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 498

City Council Bluffs State IA Zip Code 51502-0498

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

Name of Employer Western Iowa Mutual Insurance Associat Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 10 / 17 / 2012
Transaction ID : AB2C62E3708394A40896

Amount of Each Receipt this Period 325.00

B. Ms. June A. Poole A.I.A.F.
Full Name (Last, First, Middle Initial)

Mailing Address 200 N Main St

City Bel Air State MD Zip Code 21014-3544

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

Name of Employer Harford Mutual Insurance Company Occupation Vice President & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt 10 / 17 / 2012
Transaction ID : AA3BD0DE348C54071AAF

Amount of Each Receipt this Period 55.56

C. Mr. David Reddick PhD
Full Name (Last, First, Middle Initial)

Mailing Address 3601 Vincennes Rd

City Indianapolis State IN Zip Code 46268-1154

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

Name of Employer National Association of Mutual Insuran Occupation Director - Public Policy Research

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 05 / 2012
Transaction ID : AF20AD0B5B30C4529AC8

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.56

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial) A. Mr. L. Gerald Roach CPCU, FLMI		Date of Receipt
Mailing Address PO Box 6927		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Richmond	VA	23230-0927
FEC ID number of contributing federal political committee.		Transaction ID : A7FD23EBD42D549548FE
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Mutual Assurance Society of Virginia	President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2745.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Rowlinson		Date of Receipt
Mailing Address PO Box 111		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bucyrus	OH	44820-0111
FEC ID number of contributing federal political committee.		Transaction ID : AC11EDE75FF9043D580B
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
United Ohio Insurance Company	Claims Operations Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Timothy Rutledge		Date of Receipt
Mailing Address 200 N Main St		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bel Air	MD	21014-3544
FEC ID number of contributing federal political committee.		Transaction ID : AE148829A98944BD5867
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.87"/>
Name of Employer	Occupation	
Harford Mutual Insurance Company	Director of Accounting	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="238.11"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="290.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 50
<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Kent B. Shantz
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5626

City Rockford	State IL	Zip Code 61125-0626
------------------	-------------	------------------------

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

Name of Employer Rockford Mutual Insurance Company	Occupation Vice President of Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **351.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2012

Transaction ID : A56D8AA9016B54010B44

Amount of Each Receipt this Period

87.00	78.00
-------	-------

B. Mr. Donald A. Smith Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 3030 N 3rd St

City Phoenix	State AZ	Zip Code 85012-3074
-----------------	-------------	------------------------

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

Name of Employer SCF Arizona	Occupation President & CEO
---------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

Transaction ID : A69E3A04A682D473ABB4

Amount of Each Receipt this Period

105.00

C. Ms. Irica Solomon
Full Name (Last, First, Middle Initial)
Mailing Address 122 C St NW Ste 540

City Washington	State DC	Zip Code 20001-2102
--------------------	-------------	------------------------

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

Name of Employer National Association of Mutual Insuran	Occupation Political Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2012

Transaction ID : AF151B985EF6341BE976

Amount of Each Receipt this Period

43.48

SUBTOTAL of Receipts This Page (optional).....▶	226.48
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 23 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial) A. Ms. Kristen Spriggs		Date of Receipt
Mailing Address PO Box 68700		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Indianapolis	IN	46268-0700
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A90A2C49CE11549CFBFE
Name of Employer	Occupation	Amount of Each Receipt this Period
National Association of Mutual Insuran	Vice President - Member Development	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Randy Sprouse		Date of Receipt
Mailing Address 200 N Main St		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bel Air	MD	21014-3544
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A501521A2D5584904B16
Name of Employer	Occupation	Amount of Each Receipt this Period
Harford Mutual Insurance Company	Applications Development Supervisor	<input type="text" value="15.87"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="238.11"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Tim F. Sullivan RPLU		Date of Receipt
Mailing Address PO Box 68700		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Indianapolis	IN	46268-0700
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AACDB162BDD1E40CDBF(
Name of Employer	Occupation	Amount of Each Receipt this Period
NAMIC Insurance Company, Inc.	President & CEO	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="860.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Terry Suttner
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 68700
 City Indianapolis State IN Zip Code 46268-0700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Association of Mutual Insuran Occupation Vice President - Membership/Insurance
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 03 / 2012
Transaction ID : A9319C5364A3D4287A05
 Amount of Each Receipt this Period 1000.00

B. Mr. Brian Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 310
 City Wellsburg State WV Zip Code 26070-0310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Municipal Mutual Insurance Company Occupation President & CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 03 / 2012
Transaction ID : A22B17469612E4A94931
 Amount of Each Receipt this Period 1000.00

C. Mr. Paul Tetrault
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 68700
 City Indianapolis State IN Zip Code 46268-0700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Association of Mutual Insuran Occupation State Affairs Manager/Northeast Region
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 10 / 05 / 2012
Transaction ID : AEFD2BB3CC43E4F6A808
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2020.00
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 25 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Joe Thesing
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 68700

City Indianapolis	State IN	Zip Code 46268-0700
FEC ID number of contributing federal political committee. C		
Name of Employer National Association of Mutual Insuran	Occupation Assistant Vice President - State Affai	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt
10 / 05 / 2012
Transaction ID : AE497207397B94ED6AD8

Amount of Each Receipt this Period
40.00

B. Mr. Bruce D. Thomas PFMM
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 594

City Algona	State IA	Zip Code 50511-0594
FEC ID number of contributing federal political committee. C		
Name of Employer Heartland Mutual Insurance Association	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1225.00	

Date of Receipt
10 / 12 / 2012
Transaction ID : ADB8E08EF7C124195811

Amount of Each Receipt this Period
100.00

C. Mr. Bruce D. Thomas PFMM
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 594

City Algona	State IA	Zip Code 50511-0594
FEC ID number of contributing federal political committee. C		
Name of Employer Heartland Mutual Insurance Association	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2975.00	

Date of Receipt
10 / 17 / 2012
Transaction ID : A20AA4F2D20244FE39AC

Amount of Each Receipt this Period
1750.00

SUBTOTAL of Receipts This Page (optional).....▶	1890.00
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 26 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Randall Trinklein
 Full Name (Last, First, Middle Initial)
 Mailing Address One Mutual Avenue
 City Frankenmuth State MI Zip Code 48787-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Frankenmuth Mutual Insurance Company Occupation Vice President of Administration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **819.00**

Date of Receipt **10 / 12 / 2012**
Transaction ID : A11109CD6479E42AF9B7
 Amount of Each Receipt this Period **39.00**

B. Mrs. Ellen S. Truant
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City Bel Air State MD Zip Code 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harford Mutual Insurance Company Occupation Vice President-Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **404.77**

Date of Receipt **10 / 17 / 2012**
Transaction ID : AB986A6056A4B4E0D905
 Amount of Each Receipt this Period **43.65**

C. Mr. Aaron J. Valentine
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Preferred Way
 City New Berlin State NY Zip Code 13411-1896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Preferred Mutual Insurance Company Occupation Senior Vice President, Treasurer & CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **660.00**

Date of Receipt **10 / 10 / 2012**
Transaction ID : A57CB35A90C1D414EA7E
 Amount of Each Receipt this Period **60.00**

SUBTOTAL of Receipts This Page (optional)..... **142.65**
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 27 OF 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. Joseph Walsh CPCU
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 111
 City State Zip Code
 Bucyrus OH 44820-0111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ohio Mutual Insurance Company Manager Farm Lines Underwriter
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : A43A923CA969B4C89AC1
 Amount of Each Receipt this Period
 10.00

B. Mr. Mick Ware
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 5555
 City State Zip Code
 Meridian ID 83680-5555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Heritage Property & Casualty In President
 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
 10 / 01 / 2012
Transaction ID : ACC1F9160D5F74C9996D
 Amount of Each Receipt this Period
 50.00

C. Mr. Rufus Watson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3428
 City State Zip Code
 Knoxville TN 37927-3428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Farmers Mutual of Tennessee Director
 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
 10 / 03 / 2012
Transaction ID : AD2D9F7F4C2604D1581F
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....	▶	310.00
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 50
	<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)
National Association of Mutual Insurance Companies PAC

A. Mr. James W. Wilds CPCU, ARM,
 Full Name (Last, First, Middle Initial)
 Mailing Address One Mutual Avenue
 City Frankenmuth State MI Zip Code 48787-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Frankenmuth Mutual Insurance Company Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2230.00

Date of Receipt 10 / 12 / 2012
Transaction ID : A2CD8C0CFCCF04F7CBB:
 Amount of Each Receipt this Period 120.00

B. Mr. Jeffrey S. Wrobel SR, CPCU,
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 6927
 City Richmond State VA Zip Code 23230-0927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual Assurance Society of Virginia Occupation EVP, IT & Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 10 / 01 / 2012
Transaction ID : AB814A2F416EA4B79BCA
 Amount of Each Receipt this Period 42.00

C. Mr. William J. Wynne
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Main St
 City Bel Air State MD Zip Code 21014-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harford Mutual Insurance Company Occupation Underwriting Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.11

Date of Receipt 10 / 17 / 2012
Transaction ID : A2388C72653C146B29C5
 Amount of Each Receipt this Period 15.87

SUBTOTAL of Receipts This Page (optional).....▶	177.87
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 29 OF 50
<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)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jerry G. Zenke PFMM

Mailing Address **PO Box 708**

City **Houston** State **MN** Zip Code **55943-0708**

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

Name of Employer **Mound Prairie Mutual Insurance Company** Occupation **General Manager**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2104.97**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 12 / 2012

Transaction ID : ABC426FEC1B4B4B32901

Amount of Each Receipt this Period
208.33

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	208.33
TOTAL This Period (last page this line number only).....▶	9519.33

**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 30 OF 50
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
State Auto Employees Fed PAC Committee of State Automobile Mutual Insurance Company

Mailing Address 518 East Broad Street

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00430884

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2012

Transaction ID : A81E858480B9A4A738C5

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
United Services Automobile Association Employee PAC - Usaa Employee PAC

Mailing Address 9800 Fredericksburg Road

City San Antonio	State TX	Zip Code 78288
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2012

Transaction ID : A50354E1326224EC69A8

Amount of Each Receipt this Period
5000.00

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

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 981540

City El Paso State TX Zip Code 79998-1540

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : B96754A5A07E345B38DA

Amount of Each Disbursement this Period

180.81

Category/
Type

Full Name (Last, First, Middle Initial)

B. Chase Bank

Mailing Address 8751 N Michigan Road

City Indianapolis State IN Zip Code 46268

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2012

Transaction ID : B911640656576464A858

Amount of Each Disbursement this Period

406.03

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

586.84

586.84

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. ANN WAGNER FOR CONGRESS

Mailing Address PO BOX 50

City BALLWIN State MO Zip Code 63022

Purpose of Disbursement
Political Contribution

Candidate Name

Ann L Wagner

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : BBE96F15DE65347DD97A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Chris Coons for Delaware

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Sen. Christopher A. Coons

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : B84455755A39F4DA6AAB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR WATERS

Mailing Address 3700 WILSHIRE BLVD., STE. 1050-B

City LOS ANGELES State CA Zip Code 90010

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. Maxine Waters

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 35

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : B4AC9A32DC68946BC9FF

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Clay Jr. for Congress

Mailing Address PO Box 4544

City St. Louis State MO Zip Code 63108

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. William Lacy Clay

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 01

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B5A64FDF05725494BA45

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. DEB FISCHER FOR US SENATE INC

Mailing Address 317 S 12TH

City LINCOLN State NE Zip Code 68508

Purpose of Disbursement
Political Contribution

Candidate Name

Debra S Fischer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NE District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B77E5A8508BB34C34930

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS FOR GREGORY MEEKS

Mailing Address 153-01 JAMAICA AVE. SUITE 535

City JAMAICA State NY Zip Code 11432

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. Gregory W. Meeks

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 06

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : BA22B763F322445F4947

Amount of Each Disbursement this Period

1000.00

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

5000.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MIA LOVE

Mailing Address 913 WEST GROUSE CIRCLE

City SARATOGA SPRINGS State UT Zip Code 84045

Purpose of Disbursement
Political Contribution

Candidate Name

Mia Love

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2012

Transaction ID : BF1E0A3714F6442F3AF3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SUSAN BROOKS

Mailing Address 9333 N MERIDIAN STREET
SUITE 230

City INDIANAPOLIS State IN Zip Code 46260

Purpose of Disbursement
Political Contribution

Candidate Name

Susan Brooks

Office Sought: House
 Senate
 President
State: IN District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2012

Transaction ID : B57E5E45ECFA44BDE828

Amount of Each Disbursement this Period

1000.00

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
Political Contribution

Candidate Name

Dean Heller

Office Sought: House
 Senate
 President
State: NV District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2012

Transaction ID : BB5101981E34D48C3BEC

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City State Zip Code
CONCORD NC 28027

Purpose of Disbursement
Political Contribution

Candidate Name

Richard L Hudson JR

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 08

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B825F7200B8CC492AB01

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jim Himes for Congress

Mailing Address 857 Post Road, #312

City State Zip Code
Fairfield CT 06824

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. James A. Himes

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B312A9FB91DA847FD8FE

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Mailing Address 50 E ST, SE
SUITE 1

City State Zip Code
Washington DC 20003-2620

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District: Other2012

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : BCE77EB2468A743AC8F1

Amount of Each Disbursement this Period

5000.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. John Carney for Congress

Mailing Address PO Box 2162

City State Zip Code
Wilmington DE 19899

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. John C. Carney Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: DE District: 01

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B7CB5B37A03214D8C93D

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Klobuchar for Minnesota 2012

Mailing Address PO Box 4146

City State Zip Code
St Paul MN 55104

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Sen. Amy Klobuchar

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B8084C9D174594A66B92

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Mailing Address PO BOX 479

City State Zip Code
GLASTONBURY CT 06033

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Rep. John B. Larson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B54B42A3C625A414782B

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City SHELBYVILLE State IN Zip Code 46176

Purpose of Disbursement
Political Contribution

Candidate Name

Allen Lucas Messer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : BC72E4377366F4910AC4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MCCASKILL FOR MISSOURI 2012

Mailing Address 700 13TH STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Claire Mccaskill

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B6E90B6FDE9304E94ABF

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PLUMMER FOR CONGRESS

Mailing Address PO BOX 1272

City O'FALLON State IL Zip Code 62269

Purpose of Disbursement
Political Contribution

Candidate Name

Jason Plummer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B106E1C96EE9A41989BD

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. RICKY GILL FOR CONGRESS

Mailing Address P.O. BOX 691900

City STOCKTON State CA Zip Code 95269

Purpose of Disbursement
Political Contribution

Candidate Name

Ricky Gill

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B5DD512669E9F4628B79

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Schock for Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement
VOID - General 2012 Contribution

Candidate Name

Rep. Aaron Schock

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : B44BB30F22D04465CAC6

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. Schock for Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Aaron Schock

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : B868CB0E831174BA6813

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Scott Brown for Us Senate Committee Inc

Mailing Address 337 Summer Street

City Boston State MA Zip Code 02210

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Scott P. Brown

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : **B9B61D1D6E248429BB2D**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. TED CRUZ FOR SENATE

Mailing Address 815 A BRAZOS
PMB 550

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
Political Contribution

Candidate Name

Rafael Edward Cruz

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : **BBFB2E5306B53426E91B**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. TOMMY THOMPSON FOR SENATE INC

Mailing Address PO BOX 2539

City MADISON State WI Zip Code 53701

Purpose of Disbursement
Political Contribution

Candidate Name

Tommy G Thompson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : **B54CE592C955A47088AC**

Amount of Each Disbursement this Period

2000.00

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

8000.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. VALADAO FOR CONGRESS

Mailing Address 504 VAN NESS

City FRESNO State CA Zip Code 93721

Purpose of Disbursement
Political Contribution

Candidate Name

David Valadao

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 21

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : B81F7E5E76A8E4AF892A

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

38500.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Bethel for Georgia Senate

Mailing Address 1701 Briarcliff Circle

City Dalton State GA Zip Code 30720-5184

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : B3F2D8C6E4409480EB42

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. CAPITAL LEADERSHIP PAC

Mailing Address 227 WATER STREET

City Augusta State ME Zip Code 04330

Purpose of Disbursement
2012 Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : BB9E26821FF164E31B8A

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Tom Rice

Mailing Address 11213 Brookhaven Club Drive

City Johns Creek State GA Zip Code 30097

Purpose of Disbursement
Political Contribution -General 2012

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : B67BD2F8362E1474C8E4

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Committee to Re-Elect John Meadows

Mailing Address 110 Victory Court

City Calhoun State GA Zip Code 30701-2457

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B023BB979A7C442A6B71

Amount of Each Disbursement this Period

500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Committee to Re-elect Tony DeLuca

Mailing Address 1438 Homestead Dr

City Verona State PA Zip Code 15147

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B801F71805E9A49B1BEE

Amount of Each Disbursement this Period

500.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Cupp For Supreme Court

Mailing Address 260 North Cassady Ave

City Columbus State OH Zip Code 43209-1457

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : BD671E560E84C4CE09F3

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Cushing for State Rep

Mailing Address PO Box 211

City Hampden State ME Zip Code 04444

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : BDDB48DE70123415C919

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

B. Friend of Nick Micozzie

Mailing Address 6 South Springfield Road

City Clifton Heights State PA Zip Code 19018

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B10FC229A4B4542659FA

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Chip Rogers

Mailing Address Post Office Box 813

City Woodstock State GA Zip Code 30188-0813

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B4E7D885A712143E8B3A

Amount of Each Disbursement this Period

500.00

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

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

1350.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Don White

Mailing Address 618 Philadelphia Street

City Indiana State PA Zip Code 15701

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : **BB6E42731F86F41A4A41**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. Friends of Ed Thompson

Mailing Address 2205 Broadway

City Pearland State TX Zip Code 77581-6403

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : **B6D52830CEE214D3AAAF**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Hubert Vo

Mailing Address Post Office Box 2227

City Alief State TX Zip Code 77411-2227

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : **B6A1B367FA23C460EB6D**

Amount of Each Disbursement this Period

500.00

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

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

1750.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jake Corman

Mailing Address 236 Match Factory Place

City Bellefonte State PA Zip Code 16823

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : **BB7CA44EA0AD34F74A5F**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. Friends of Joe Scarnati

Mailing Address 978 Evergreen Street

City brockway State PA Zip Code 15824

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : **BC1584BB2774E4091A90**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. Friends of Larry Taylor

Mailing Address PO Box 1208

City Friendswood State TX Zip Code 77549-1208

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : **B27DE770FFE64430D803**

Amount of Each Disbursement this Period

1000.00

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

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Mike Jacobs

Mailing Address 3823 Granger Drive

City Atlanta State GA Zip Code 30341-1726

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B12FC6B98B69E4342BE6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Wendell Willard

Mailing Address 755 River Gate Drive

City Sandy Springs State GA Zip Code 30350-4621

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B860229EC87784ABF90A

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Glenn Hegar for State Senate

Mailing Address Post Office Box 1008

City Katy State TX Zip Code 77492-1008

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

Transaction ID : B8F571396798B4CBA966

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

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**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. IMAGINE MAINE

Mailing Address 30 KNOX STREET

City THOMASTON State ME Zip Code 04861

Purpose of Disbursement
2012 Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Other2012**

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B6AAA9774A75041DB87E

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. J.M. Lozano for State Rep Campaign

Mailing Address 727 Arroyo Drive

City Kingsville State TX Zip Code 78363-7416

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B6F74A26C9D22442CA40

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. John Smithee Campaign

Mailing Address Post Office Box 2910

City Austin State TX Zip Code 78768-2910

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B9BD6D26EE1064C0BA8F

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Kenneth F. Sheets for State Rep

Mailing Address Postal Mail Box #869

City Dallas State TX Zip Code 75214

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B3C8298B047484ECA69

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Leticia Van De Putte Campaign

Mailing Address 700 North Saint Mary's Street
Suite 1725

City San Antonio State TX Zip Code 78205-3546

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B98F204DD4CF546FE959

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Matt Lehman for State Representative

Mailing Address 663 Lehman Street

City Berne State IN Zip Code 46711-2334

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2012

Transaction ID : B5C05CD90F86B4B9CA1B

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mike Turzai Campaign

Mailing Address 29 Meetinghouse Lane

City Bradford Woods State PA Zip Code 15015

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : BFF4D09438A7F40A18E4

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ohio House Republican Organizational Committee

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220-8113

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District: Other2012

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2012

Transaction ID : B78101492BBDF40E1A61

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Texans for Kelly Hancock

Mailing Address P.O. Box 821349

City North Richland Hills State TX Zip Code 76182-1349

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : B1FFED42EDE614D2D94B

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

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

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Tim Golden for Senate

Mailing Address Post Office Box 1251

City Valdosta State GA Zip Code 31603-1251

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : B938C72BC356E40D8B10

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Win with Waugh Committee

Mailing Address PO Box 243

City Shrewsberry State PA Zip Code 17327

Purpose of Disbursement
General 2012 Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : BD5C72F800F2B4496A2A

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

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

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

1250.00

18350.00