

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 151
	<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. Randy Gerdes
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 CopperPoint Mutual Insurance Company Occupation Vice President of Strategy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **395.50**

Date of Receipt **10 / 02 / 2015**

Transaction ID : A64AF9BE91538437AAFE

Amount of Each Receipt this Period **20.83**

B. Mr. Randy Gerdes
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 CopperPoint Mutual Insurance Company Occupation Vice President of Strategy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **416.33**

Date of Receipt **10 / 16 / 2015**

Transaction ID : A75691FC511ED486F89B

Amount of Each Receipt this Period **20.83**

C. Mr. Henry R. Gibbel
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 900

City Lititz State PA Zip Code 17543-7007

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

Name of Employer Lititz Mutual Insurance Company Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **4350.00**

Date of Receipt **10 / 27 / 2015**

Transaction ID : AE9B3E659877E4B9FB83

Amount of Each Receipt this Period **1850.00**

SUBTOTAL of Receipts This Page (optional)..... **1891.66**

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