

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAILCENTER

2023 JAN -3 PM 1:52

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MUNICH AMERICAN REASSURANCE COMPANY PAC, INC

ADDRESS (number and street)

3500 LENOX RD, NE

SUITE 900

Check if different than previously reported. (ACC)

ATLANTA

GA

30326

4231

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0054316

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

10 / 01 / 2022

through

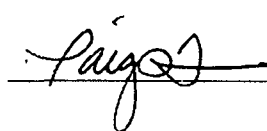
11 / 28 / 2022

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

Type or Print Name of Treasurer

PAIGE S. FREEMAN

Signature of Treasurer



Date

12 / 29 / 2022

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

Office Use Only

FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MUNICH AMERICAN REASSURANCE COMPANY PAC, INC.

Report Covering the Period

From:

10 / 01 / 2022

To:

11 / 28 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		4258.37
(b) Cash on Hand at Beginning of Reporting Period	7258.77	
(c) Total Receipts (from Line 19)	500.02	3500.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7758.79	7758.79
7. Total Disbursements (from Line 31)	5015.00	5015.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2743.79	2743.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

2025 RELEASE UNDER E.O. 14176

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MUNICH AMERICAN REASSURANCE COMPANY PAC, INC.

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2022

To

MM / DD / YYYY
11 / 28 / 2022

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

500.00

3500.00

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

500.00

3500.00

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

02

42

18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account (from Schedule H3).....

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

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

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

500.02

3500.42

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

500.02

3500.42

NON-FEDERAL AND LEVIN FUNDS

DETAILED SUMMARY PAGE
of Disbursements

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Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii). Non-Federal Share.....		
(b) Other Federal Operating Expenditures	15.00	15.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15.00	15.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	5000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5015.00	5015.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

2016-10-10 10:10:10 AM

DETAILED SUMMARY PAGE
of Disbursements

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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)	500.00	3500.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500.00	3500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15.00	15.00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15.00	15.00

NON-FEDERAL CAMPAIGN FINANCING

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

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

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)
MUNICH AMERICAN REASSURANCE COMPANY PAC, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FREEMAN, PAIGE S.

Mailing Address
988 WILDWOOD RD NE

City **ATLANTA** State **GA** Zip Code **30306**

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

Name of Employer (for Individual) **MUNICH RE** Occupation (for Individual) **SVP, GENERAL COUNSEL**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
11 / 17 / 2022

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

NON-FUNCTIONAL DOCUMENT

**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)	PAGE 1 OF 1
	<input type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 26 <input type="checkbox"/> 27	
	<input type="checkbox"/> 28a <input type="checkbox"/> 28b <input checked="" type="checkbox"/> 28c <input type="checkbox"/> 29 <input type="checkbox"/> 30b	

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)
MUNICH AMERICAN REASSURANCE COMPANY PAC, INC.

A. BRAD SCHNEIDER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 20 / 2022

Mailing Address: PO BOX 1318

City: DEERFIELD State: IL Zip Code: 60015

Purpose of Disbursement: CONTRIBUTION

FEC Identification Number: C 00495952

Candidate Name: BRAD SCHNEIDER FOR CONGRESS

Amount of Each Disbursement this Period: 2500.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

B. BILL CASSIDY FOR US SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 24 / 2022

Mailing Address: PO BOX 80505

City: BATON ROUGE State: LA Zip Code: 70898

Purpose of Disbursement: CONTRIBUTION

FEC Identification Number: C 00543983

Candidate Name: BILL CASSIDY FOR CONGRESS

Amount of Each Disbursement this Period: 2500.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

FEC Identification Number: C

Candidate Name:

Amount of Each Disbursement this Period:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 5000.00

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ORIGIN ID:TMAA (770) 350-3203
JENNIFER ROBERTS
MUNICH AMERICAN REASSURANCE CO
MUNICH AMERICAN REASSURANCE COMPANY
56 PERIMETER CENTER EAST, SUITE 500
ATLANTA, GA 30346
UNITED STATES US

SHIP DATE: 29DEC22
ACTWGT:
CAD: 9883954/INET4534

BILL SENDER



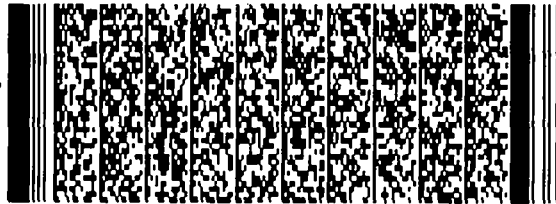
TO FEDERAL ELECTION COMMISSION
FEDERAL ELECTION COMMISSION
1050 FIRST STREET NORTHEAST

WASHINGTON DC 20002

(770) 350-3203 REF.

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FRI - 30 DEC 10:30A
PRIORITY OVERNIGHT

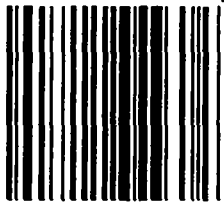
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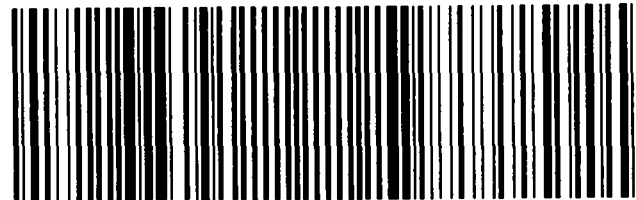
TRK# 7709 0734 0658
0201

TUE - 03 JAN AA
PRIORITY OVERNIGHT



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20002
DC-US
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363084 38Dec2022 551A 581G5/C8CF/C088

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

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date <i>12/29/22</i>
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>SPU</i>	<i>1/3/23</i>
PREPARER	DATE PREPARED

(3/2015)

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