FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

ADDRESS (number and street) ▼

316 Pennsylvania Ave SE

Suite 401

☐ Check if different than previously reported. (ACC)

WASHINGTON | DC | 20003 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00503680

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period 05 / 01 / 2014 through 05 / 31 / 2014

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 Jack Tank

Signature of Treasurer *Jack Tank* ***[Electronically Filed]*** Date 06 / 18 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

Report Covering the Period: From: MM 05 / DD 01 / YYYY 2014 To: MM 05 / DD 31 / YYYY 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY 2014		35918.27
(b) Cash on Hand at Beginning of Reporting Period.....	29172.17	
(c) Total Receipts (from Line 19).....	60945.00	65705.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	90117.17	101623.27
7. Total Disbursements (from Line 31).....	13172.30	24678.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	76944.87	76944.87
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

Report Covering the Period: From: 05 / 01 / 2014 To: 05 / 01 / 2014

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)	56300.00	60640.00
(ii) Unitemized	4645.00	5065.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	60945.00	65705.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	60945.00	65705.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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)) ▶	60945.00	65705.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	60945.00	65705.00

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	672.30	678.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	672.30	678.40
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	12500.00	24000.00
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
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))	13172.30	24678.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	13172.30	24678.40

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	60945.00	65705.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60945.00	65705.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	672.30	678.40
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	672.30	678.40

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Koanne Babel
Mailing Address: 510 W Old Miltary Rd
City: Wood River | State: NE | Zip Code: 68883
FEC ID number of contributing federal political committee: C
Name of Employer: Babel Agency | Occupation: Office Admin
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2200.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4703
Amount of Each Receipt this Period: 2200.00

B. Full Name (Last, First, Middle Initial): Carol Bloesser
Mailing Address: PO Box 70
City: Tribune | State: KS | Zip Code: 67879
FEC ID number of contributing federal political committee: C
Name of Employer: First Tribune Insurance Agency | Occupation: Insurance Sales
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4679
Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial): Aaron Brand
Mailing Address: 8575 N 130th Rd
City: Cairo | State: NE | Zip Code: 68824
FEC ID number of contributing federal political committee: C
Name of Employer: Hudson Crop | Occupation: Regional Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 350.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4677
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 2850.00

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

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Burl Buchanan
Mailing Address: PO Box 157
City: Spearman State: TX Zip Code: 79081
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Insurance/Farmer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4695
Amount of Each Receipt this Period: 2400.00

B. Full Name (Last, First, Middle Initial): Roger Buchanan
Mailing Address: PO Box 157
City: Spearman State: TX Zip Code: 79081
FEC ID number of contributing federal political committee: C
Name of Employer: The Hansford Agency/Self
Occupation: Insurance/Farmer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3200.00
Date of Receipt: 05 / 13 / 2014
Transaction ID : SA11AI.4707
Amount of Each Receipt this Period: 3000.00

C. Full Name (Last, First, Middle Initial): Robert Carden
Mailing Address: 350 East Lake Elbert Drive NE
City: Winter Haven State: FL Zip Code: 33882
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2305.00
Date of Receipt: 05 / 13 / 2014
Transaction ID : SA11AI.4706
Amount of Each Receipt this Period: 2305.00

SUBTOTAL of Receipts This Page (optional) ▶ 7705.00

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

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Max J. Claybaker
Mailing Address: 16018 W Doolin Ave
City: Blackwell State: OK Zip Code: 74631
FEC ID number of contributing federal political committee: C
Name of Employer: Claybaker Crop Insur Agency
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 13 / 2014
Transaction ID : SA11AI.4593
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Max J. Claybaker
Mailing Address: 16018 W Doolin Ave
City: Blackwell State: OK Zip Code: 74631
FEC ID number of contributing federal political committee: C
Name of Employer: Claybaker Crop Insur Agency
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 700.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4678
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial): William Cole
Mailing Address: 5165 Macedonia Rd
City: Batesville State: MS Zip Code: 38606
FEC ID number of contributing federal political committee: C
Name of Employer: Cole & Short Agency
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1100.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4698
Amount of Each Receipt this Period: 1100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1800.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): John Dalton
Mailing Address: 16749 State Orchard Road
City: Council Bluffs State: IA Zip Code: 51503
FEC ID number of contributing federal political committee: C
Name of Employer: Agri-Land Insurance
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4674
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): M.D. Dunn
Mailing Address: 320 West Lee Drive
City: Clarksdale State: MS Zip Code: 38614
FEC ID number of contributing federal political committee: C
Name of Employer: Diversified Insurance Agency
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2700.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4603
Amount of Each Receipt this Period: 2700.00

C. Full Name (Last, First, Middle Initial): Shirley Ferree
Mailing Address: 13709 S County Road 300 W
City: Jasonville State: IN Zip Code: 47438
FEC ID number of contributing federal political committee: C
Name of Employer: Springer Insurance & Financial
Occupation: Crop Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4671
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 3450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Stephanie Flemming
Mailing Address: 22 Office Park Court
City: Columbia State: SC Zip Code: 29223
FEC ID number of contributing federal political committee: C
Name of Employer: Midland Agency Insurance
Occupation: Office Admin
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2850.00
Date of Receipt: 05 / 27 / 2014
Transaction ID : SA11AI.4681
Amount of Each Receipt this Period: 2850.00

B. Full Name (Last, First, Middle Initial): Mike Frederick
Mailing Address: 15245 447th Ave
City: Waubay State: SD Zip Code: 57273
FEC ID number of contributing federal political committee: C
Name of Employer: Breske Insurance
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2800.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4602
Amount of Each Receipt this Period: 2800.00

C. Full Name (Last, First, Middle Initial): Raford Hargrove
Mailing Address: PO Box 400
City: Rotan State: TX Zip Code: 79546
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Crop Insurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4609
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 10650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Becky Hawker
Mailing Address: PO Box 968
City: Blackfoot State: ID Zip Code: 83221
FEC ID number of contributing federal political committee: C
Name of Employer: Premier Insurance
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2805.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4596
Amount of Each Receipt this Period: 2805.00

B. Full Name (Last, First, Middle Initial): Tracy Hawker
Mailing Address: 1003 W 300 S
City: Blackfoot State: ID Zip Code: 83221
FEC ID number of contributing federal political committee: C
Name of Employer: Premiere Insurance
Occupation: Agency Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2905.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4595
Amount of Each Receipt this Period: 2805.00

C. Full Name (Last, First, Middle Initial): Don Heller
Mailing Address: 330 Avenue N
City: Anson State: TX Zip Code: 79501
FEC ID number of contributing federal political committee: C
Name of Employer: Ag Crop Insurance
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1100.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4600
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6610.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Ronnie Holt
Mailing Address: PO Box 304
City: Muleshoe State: TX Zip Code: 79347
FEC ID number of contributing federal political committee: C
Name of Employer: Ronnie Holt Insurance
Occupation: Farmer/Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 350.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4673
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial): Joni Jackson
Mailing Address: 2719 Thunderbird Drive
City: Hayes State: KS Zip Code: 67601
FEC ID number of contributing federal political committee: C
Name of Employer: Ag Pro Crop Insurance
Occupation: Sales
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1100.00
Date of Receipt: 05 / 13 / 2014
Transaction ID : SA11AI.4604
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): John R. Keister
Mailing Address: PO Box 340
City: Blue Earth State: MN Zip Code: 56013
FEC ID number of contributing federal political committee: C
Name of Employer: Minn-Iowa Crop Insurance
Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1900.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4613
Amount of Each Receipt this Period: 1900.00

SUBTOTAL of Receipts This Page (optional) ▶ 3250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): John R. Keister
Mailing Address: PO Box 340
City: Blue Earth State: MN Zip Code: 56013
FEC ID number of contributing federal political committee: C
Name of Employer: Minn-Iowa Crop Insurance
Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4631
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Travis Keister
Mailing Address: 918 Upper Valley Drive
City: Blue Earth State: MN Zip Code: 56013
FEC ID number of contributing federal political committee: C
Name of Employer: Minn-Iowa Crop Insurance
Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4612
Amount of Each Receipt this Period: 1100.00

C. Full Name (Last, First, Middle Initial): Erick Richards
Mailing Address: 6 E Harwell Street
City: Stamford State: TX Zip Code: 79553
FEC ID number of contributing federal political committee: C
Name of Employer: Ag Crop Insurance
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4610
Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Erick Richards
Mailing Address: 6 E Harwell Street
City: Stamford State: TX Zip Code: 79553
FEC ID number of contributing federal political committee: C
Name of Employer: Ag Crop Insurance
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1600.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4618
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Denise Riegel
Mailing Address: PO Box 7
City: Ford State: KS Zip Code: 67842
FEC ID number of contributing federal political committee: C
Name of Employer: Riegel Insurance, Inc
Occupation: Insurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4672
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Jordan Roach
Mailing Address: 30 River Park Place West Ste 160
City: Fresno State: CA Zip Code: 93720
FEC ID number of contributing federal political committee: C
Name of Employer: Global Ag
Occupation: Insurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4683
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Jordan Roach
Mailing Address: 30 River Park Place West, Ste 160
City: Fresno State: CA Zip Code: 93720
FEC ID number of contributing federal political committee: C
Name of Employer: Global Ag
Occupation: Insurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2650.00
Date of Receipt: 05/13/2014
Transaction ID : SA11AI.4608
Amount of Each Receipt this Period: 2150.00

B. Full Name (Last, First, Middle Initial): Tom Sell
Mailing Address: 2915 19th Street
City: Lubbock State: TX Zip Code: 79401
FEC ID number of contributing federal political committee: C
Name of Employer: Combest, Sell & Associates
Occupation: Insurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 05/12/2014
Transaction ID : SA11AI.4697
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Marc Shepard
Mailing Address: 2439 N Main Street
City: Belton State: TX Zip Code: 76513
FEC ID number of contributing federal political committee: C
Name of Employer: Hargrove Crop Insurance
Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 435.00
Date of Receipt: 05/15/2014
Transaction ID : SA11AI.4667
Amount of Each Receipt this Period: 435.00

SUBTOTAL of Receipts This Page (optional) ▶ 4585.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Nickey Smith
Mailing Address: 312 N Houston
City: Lamesa | State: TX | Zip Code: 79331
FEC ID number of contributing federal political committee: C
Name of Employer: Southern Crop Insurance | Occupation: Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4684
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Timothy Sonnenberg
Mailing Address: 18555 Vansway Drive
City: Sterling | State: CO | Zip Code: 80751
FEC ID number of contributing federal political committee: C
Name of Employer: Sonnenberg Agency LLC | Occupation: Insurance Agent - Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2100.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4699
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Jack C. Tank
Mailing Address: 624 St Thomas Ct
City: Iowa City | State: IA | Zip Code: 52245
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2800.00
Date of Receipt: 05 / 12 / 2014
Transaction ID : SA11AI.4696
Amount of Each Receipt this Period: 2700.00

SUBTOTAL of Receipts This Page (optional) ▶ 5200.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): Marva Ulleland
Mailing Address: 1700 S Assembly Street, PO Box 2515
City: Spokane State: WA Zip Code: 99220
FEC ID number of contributing federal political committee: C
Name of Employer: Northwest Farm Credit Services
Occupation: VP Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1640.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4662
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Sherry Wegner
Mailing Address: PO Box 3550
City: Big Spring State: TX Zip Code: 79721
FEC ID number of contributing federal political committee: C
Name of Employer: Self (Sherry Wegner Agency)
Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 05 / 13 / 2014
Transaction ID : SA11AI.4705
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial): Jason L. Williamson
Mailing Address: 2262 Road 60
City: Payne State: OH Zip Code: 45880
FEC ID number of contributing federal political committee: C
Name of Employer: Williamson Insurance Agency
Occupation: Crop Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 3000.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4607
Amount of Each Receipt this Period: 3000.00

SUBTOTAL of Receipts This Page (optional) ▶ 3400.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A.
Full Name (Last, First, Middle Initial): Rex L. Williamson
Mailing Address: 10267 Rd 95
City: Paulding State: OH Zip Code: 45879
FEC ID number of contributing federal political committee: C
Name of Employer: Williamson Insurance Agency
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4727
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Teresa P Williamson
Mailing Address: 10267 Rd 95
City: Paulding State: OH Zip Code: 45879
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Insurance Agent
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 05 / 15 / 2014
Transaction ID : SA11AI.4606
Amount of Each Receipt this Period: 2000.00

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) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶ 56300.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A.
Full Name (Last, First, Middle Initial): Paypal
Mailing Address: 2211 North First Street
City: San Jose State: CA Zip Code: 95131
Purpose of Disbursement: CC Processing Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 05 / D D 31 / Y Y Y Y 2014
Transaction ID : SB21B.4708
Amount of Each Disbursement this Period: 672.30

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / 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:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 672.30

TOTAL This Period (last page this line number only) ▶ 672.30

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): BOEHNER FOR SPEAKER
Mailing Address: 320 FIRST ST., SE
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement: See Allocation Memo Below
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2013 ☐ Primary ☐ General ☒ Other (specify) ▼ Other
Date of Disbursement: M M 05 / D D 13 / Y Y Y Y 2014
Transaction ID : SB23.4709
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): FRIENDS OF JOHN BOEHNER
Mailing Address: 7908 CINCINNATI DAYTON ROAD SUITE I
City: WEST CHESTER State: OH Zip Code: 45069
Purpose of Disbursement: Political Contribution
Candidate Name: JOHN BOEHNER
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 08
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify) ▼
Date of Disbursement: M M 05 / D D 16 / Y Y Y Y 2014
Transaction ID : SB23.4709.0
Amount of Each Disbursement this Period: 5000.00
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): BOOZMAN FOR ARKANSAS
Mailing Address: PO BOX 671
City: ROGERS State: AR Zip Code: 72757
Purpose of Disbursement: Political Contribution
Candidate Name: JOHN BOOZMAN
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: AR District: 00
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 05 / D D 16 / Y Y Y Y 2014
Transaction ID : SB23.4716
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A. Full Name (Last, First, Middle Initial): CHARLES BOUSTANY JR. MD FOR CONGRESS, INC.
Mailing Address: PO BOX 80126
City: LAFAYETTE State: LA Zip Code: 70598
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: DR. CHARLES W. BOUSTANY JR.
Office Sought: ☒ House ☐ Senate ☐ President
State: LA District: 07
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 30 / 2014
Transaction ID : SB23.4723
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): CITIZENS FOR COCHRAN
Mailing Address: PO BOX 7183
City: TUPELO State: MS Zip Code: 38802
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: THAD COCHRAN
Office Sought: ☐ House ☒ Senate ☐ President
State: MS District: 00
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 05 / 16 / 2014
Transaction ID : SB23.4715
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): HEIDI FOR SENATE
Mailing Address: PO BOX 1577
City: BISMARCK State: ND Zip Code: 58502
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: HEIDI HEITKAMP
Office Sought: ☐ House ☒ Senate ☐ President
State: ND District: 00
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 30 / 2014
Transaction ID : SB23.4722
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) ▶

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

A.
Full Name (Last, First, Middle Initial): PAT ROBERTS FOR US SENATE INC
Mailing Address: PO BOX 433
City: GREAT BEND State: KS Zip Code: 67530
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: PAT ROBERTS
Office Sought: ☐ House ☒ Senate ☐ President
State: KS District: 00
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 30 / 2014
Transaction ID : SB23.4724
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): WALORSKI FOR CONGRESS INC
Mailing Address: PO BOX 954
City: MISHAWAKA State: IN Zip Code: 46546
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: JACKIE WALORSKI SWIHART
Office Sought: ☒ House ☐ Senate ☐ President
State: IN District: 02
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 05 / 16 / 2014
Transaction ID : SB23.4719
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 2000.00

TOTAL This Period (last page this line number only) ▶ 12500.00