

# 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**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **ONE GEICO PLAZA**  
Check if different than previously reported. (ACC) **WASHINGTON DC 20076**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00343749** 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2021 through  /  /  2021

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

Signature of Treasurer *Crutchfield, Ryan, , ,* [Electronically Filed] Date  /  /  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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

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="2021"/>	<input type="text" value="48404.52"/>	<input type="text" value="48404.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="50454.02"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6622.50"/>	<input type="text" value="13678.00"/>
(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="57076.52"/>	<input type="text" value="62082.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8500.00"/>	<input type="text" value="13506.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="48576.52"/>	<input type="text" value="48576.52"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

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).....	4435.00	6545.00
(ii) Unitemized .....	2187.50	7133.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6622.50	13678.00
(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) .....	6622.50	13678.00
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)).....▶	6622.50	13678.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6622.50	13678.00

**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 .....	0.00	6.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	6.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	13500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8500.00	13506.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	13506.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6622.50	13678.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6622.50	13678.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	6.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	6.00

**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 6 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Black, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15237 Briar Cliff Manor Way  
 City Burtonsville State MD Zip Code 20866-1662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33066**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Black, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15237 Briar Cliff Manor Way  
 City Burtonsville State MD Zip Code 20866-1662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33067**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Black, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15237 Briar Cliff Manor Way  
 City Burtonsville State MD Zip Code 20866-1662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33068**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Costa, William, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 607 Pebble Beach Dr  
 City Silver Spring State MD Zip Code 20904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 28 / 2021**  
**Transaction ID : SA11AI.33132**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Costa, William, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 607 Pebble Beach Dr  
 City Silver Spring State MD Zip Code 20904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 24 / 2021**  
**Transaction ID : SA11AI.33133**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Costa, William, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 607 Pebble Beach Dr  
 City Silver Spring State MD Zip Code 20904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 09 / 2021**  
**Transaction ID : SA11AI.33134**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Craig, Neal, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4700 Rams Head Ct  
 City Rockville State MD Zip Code 20853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33120**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Craig, Neal, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4700 Rams Head Ct  
 City Rockville State MD Zip Code 20853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33121**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Craig, Neal, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4700 Rams Head Ct  
 City Rockville State MD Zip Code 20853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33122**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Hobart, Janice Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1006 Ramsey St  
 City Alexandria State VA Zip Code 22301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33223**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Hobart, Janice Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1006 Ramsey St  
 City Alexandria State VA Zip Code 22301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33224**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Hobart, Janice Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1006 Ramsey St  
 City Alexandria State VA Zip Code 22301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33225**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Hopkins, Lily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12962 Marcy Ranch Rd  
 City Santa Ana State CA Zip Code 92705-2286  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.29055**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Hopkins, Lily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12962 Marcy Ranch Rd  
 City Santa Ana State CA Zip Code 92705-2286  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.29056**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Hopkins, Lily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12962 Marcy Ranch Rd  
 City Santa Ana State CA Zip Code 92705-2286  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.29057**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ingall, Seth, M., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2021 <b>Transaction ID : SA11AI.33123</b>		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 60.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Memo Item Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ingall, Seth, M., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 19 / 2021 <b>Transaction ID : SA11AI.33124</b>		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 60.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Memo Item Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ingall, Seth, M., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2021 <b>Transaction ID : SA11AI.33125</b>		
Mailing Address 9308 Inglewood Ct			Amount of Each Receipt this Period 90.00		
City Potomac	State MD	Zip Code 20854	Memo Item <input type="checkbox"/> Memo Item Payroll deduction \$30.00 biweekly		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GEICO		Occupation (for Individual) SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Ingall, Seth, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9308 Inglewood Ct  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33126**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**B. Ingall, Seth, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9308 Inglewood Ct  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33127**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**C. Ingall, Seth, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9308 Inglewood Ct  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33128**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Markel, Scott, Edward, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4440 Willard Ave  
 Apt 501  
 City Chevy Chase State MD Zip Code 20815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33136**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

**B. Markel, Scott, Edward, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4440 Willard Ave  
 Apt 501  
 City Chevy Chase State MD Zip Code 20815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33137**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

**C. Markel, Scott, Edward, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4440 Willard Ave  
 Apt 501  
 City Chevy Chase State MD Zip Code 20815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2021**  
**Transaction ID : SA11AI.33138**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

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

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

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

FOR LINE NUMBER: PAGE 14 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Markel, Scott, Edward, ,**

Mailing Address 4440 Willard Ave  
 Apt 501

City Chevy Chase    State MD    Zip Code 20815

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

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

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 / 28 / 2021

**Transaction ID : SA11AI.33139**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Markel, Scott, Edward, ,**

Mailing Address 4440 Willard Ave  
 Apt 501

City Chevy Chase    State MD    Zip Code 20815

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2021

**Transaction ID : SA11AI.33140**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Markel, Scott, Edward, ,**

Mailing Address 4440 Willard Ave  
 Apt 501

City Chevy Chase    State MD    Zip Code 20815

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2021

**Transaction ID : SA11AI.33141**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Payroll deduction \$25.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33021**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**B. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33022**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**C. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 30 / 2021**  
**Transaction ID : SA11AI.33023**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33024**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**B. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33025**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

**C. McKenzie, Gary, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Waters Edge Dr.  
 City Lizella State GA Zip Code 31052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33026**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$30.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Measley, Paul, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14221 Autumn Gold Rd  
 City Boyds State MD Zip Code 20841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33184**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**B. Measley, Paul, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14221 Autumn Gold Rd  
 City Boyds State MD Zip Code 20841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33185**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**C. Measley, Paul, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14221 Autumn Gold Rd  
 City Boyds State MD Zip Code 20841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 30 / 2021**  
**Transaction ID : SA11AI.33186**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Measley, Paul, W, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14221 Autumn Gold Rd

City Boys	State MD	Zip Code 20841
--------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2021

**Transaction ID : SA11AI.33187**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll deduction \$20.00 biweekly

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

Mailing Address 14221 Autumn Gold Rd

City Boys	State MD	Zip Code 20841
--------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2021

**Transaction ID : SA11AI.33188**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll deduction \$20.00 biweekly

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

Mailing Address 14221 Autumn Gold Rd

City Boys	State MD	Zip Code 20841
--------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

**Transaction ID : SA11AI.33189**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33154**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

**B. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33155**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

**C. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 30 / 2021**  
**Transaction ID : SA11AI.33156**  
 Amount of Each Receipt this Period 45.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33157**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

**B. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33158**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

**C. Nestegard, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13892 Douglas Ranch Dr  
 City Pine State CO Zip Code 80470-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33159**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll deduction \$15.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Nicely, Olza, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5830 Pageland Ln  
 City Gainesville State VA Zip Code 20155-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Executive Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33277**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Payroll deduction \$100.00 biweekly

**B. Nicely, Olza, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5830 Pageland Ln  
 City Gainesville State VA Zip Code 20155-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Executive Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33278**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Payroll deduction \$100.00 biweekly

**C. Nicely, Olza, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5830 Pageland Ln  
 City Gainesville State VA Zip Code 20155-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Executive Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 30 / 2021**  
**Transaction ID : SA11AI.33279**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Payroll deduction \$100.00 biweekly

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

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

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

FOR LINE NUMBER: PAGE 22 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 5830 Pageland Ln

City Gainesville	State VA	Zip Code 20155-1531
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Executive Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2021

**Transaction ID : SA11AI.33280**

Amount of Each Receipt this Period  
200.00

Memo Item  
Payroll deduction \$100.00 biweekly

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

Mailing Address 5830 Pageland Ln

City Gainesville	State VA	Zip Code 20155-1531
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Executive Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2021

**Transaction ID : SA11AI.33281**

Amount of Each Receipt this Period  
200.00

Memo Item  
Payroll deduction \$100.00 biweekly

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

Mailing Address 5830 Pageland Ln

City Gainesville	State VA	Zip Code 20155-1531
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Executive Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

**Transaction ID : SA11AI.33282**

Amount of Each Receipt this Period  
200.00

Memo Item  
Payroll deduction \$100.00 biweekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. OKeefe, John, c, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22642 Taylorstown Hunt Ct

City Ashburn	State VA	Zip Code 20148
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2021

**Transaction ID : SA11AI.33097**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

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

Mailing Address 22642 Taylorstown Hunt Ct

City Ashburn	State VA	Zip Code 20148
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2021

**Transaction ID : SA11AI.33098**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

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

Mailing Address 22642 Taylorstown Hunt Ct

City Ashburn	State VA	Zip Code 20148
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

**Transaction ID : SA11AI.33099**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 24 OF 39  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Pon, Dina, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4835 Cordell Ave  
 Apt 1112  
 City Bethesda State MD Zip Code 20814-3170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33211**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Pon, Dina, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4835 Cordell Ave  
 Apt 1112  
 City Bethesda State MD Zip Code 20814-3170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33212**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Pon, Dina, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4835 Cordell Ave  
 Apt 1112  
 City Bethesda State MD Zip Code 20814-3170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33213**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Quagliato, John, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Navaja Road  
 City El Cajon State CA Zip Code 92020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 22 / 2021  
**Transaction ID : SA11AI.33100**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

**B. Quagliato, John, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Navaja Road  
 City El Cajon State CA Zip Code 92020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 19 / 2021  
**Transaction ID : SA11AI.33101**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

**C. Quagliato, John, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Navaja Road  
 City El Cajon State CA Zip Code 92020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11AI.33102**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Quagliato, John, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Navaja Road  
 City El Cajon State CA Zip Code 92020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33103**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll deduction \$25.00 biweekly

**B. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2021  
**Transaction ID : SA11AI.32999**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**C. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 19 / 2021  
**Transaction ID : SA11AI.33000**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11AI.33001**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**B. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33002**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**C. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33003**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Rinella, Angela, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7544 John Hancock Dr  
 City Winter Garden State FL Zip Code 34787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **12 / 23 / 2021**  
**Transaction ID : SA11AI.33004**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**B. Shafner, Jonathan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6108 Wayside Dr  
 City North Bethesda State MD Zip Code 20852-3534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 28 / 2021**  
**Transaction ID : SA11AI.33114**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Shafner, Jonathan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6108 Wayside Dr  
 City North Bethesda State MD Zip Code 20852-3534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 24 / 2021**  
**Transaction ID : SA11AI.33115**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Shafner, Jonathan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6108 Wayside Dr  
 City North Bethesda State MD Zip Code 20852-3534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 23 / 2021**  
**Transaction ID : SA11AI.33116**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Silva, Franklin, Kelly, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 173 Blue Heron Dr.  
 City Eatonton State GA Zip Code 31024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 22 / 2021**  
**Transaction ID : SA11AI.33202**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**C. Silva, Franklin, Kelly, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 173 Blue Heron Dr.  
 City Eatonton State GA Zip Code 31024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 19 / 2021**  
**Transaction ID : SA11AI.33203**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

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
09		30		2021

**Transaction ID : SA11AI.33204**

Amount of Each Receipt this Period  
60.00

Memo Item  
Payroll deduction \$20.00 biweekly

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2021

**Transaction ID : SA11AI.33205**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll deduction \$20.00 biweekly

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Silva, Franklin, Kelly, ,

Mailing Address 173 Blue Heron Dr.

City Eatonton	State GA	Zip Code 31024
------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) RVP
--	------------------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2021

**Transaction ID : SA11AI.33206**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Silva, Franklin, Kelly, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 173 Blue Heron Dr.  
 City Eatonton State GA Zip Code 31024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **12 / 23 / 2021**  
**Transaction ID : SA11AI.33207**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll deduction \$20.00 biweekly

**B. Singh, Kushwant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21209 Emerald Drive  
 City Germantown State MD Zip Code 20876-5931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 28 / 2021**  
**Transaction ID : SA11AI.33274**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Singh, Kushwant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21209 Emerald Drive  
 City Germantown State MD Zip Code 20876-5931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 24 / 2021**  
**Transaction ID : SA11AI.33275**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Singh, Kushwant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21209 Emerald Drive  
 City Germantown State MD Zip Code 20876-5931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33276**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Smith, Stephen, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13144 CliftonRoad  
 City Silver Spring State MD Zip Code 20904-3246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33262**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Smith, Stephen, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13144 CliftonRoad  
 City Silver Spring State MD Zip Code 20904-3246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33263**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. Smith, Stephen, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13144 CliftonRoad  
 City Silver Spring State MD Zip Code 20904-3246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 23 / 2021**  
**Transaction ID : SA11AI.33264**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Tate, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 306 Hassellwood Drive  
 City Cary State NC Zip Code 27518-3013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 28 / 2021**  
**Transaction ID : SA11AI.33078**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Tate, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 306 Hassellwood Drive  
 City Cary State NC Zip Code 27518-3013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 24 / 2021**  
**Transaction ID : SA11AI.33079**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 39
<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 306 Hassellwood Drive

City Cary	State NC	Zip Code 27518-3013
--------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

**Transaction ID : SA11AI.33080**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

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

Mailing Address 6710 Poley Creek Dr W

City Lakeland	State FL	Zip Code 33811-2420
------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2021

**Transaction ID : SA11AI.29097**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

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

Mailing Address 6710 Poley Creek Dr W

City Lakeland	State FL	Zip Code 33811-2420
------------------	-------------	------------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2021

**Transaction ID : SA11AI.29098**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. West, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6710 Poley Creek Dr W  
 City Lakeland State FL Zip Code 33811-2420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.29099**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. White, Hollis, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13610 Meadow Glenn  
 City Clarksville State MD Zip Code 21029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33199**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. White, Hollis, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13610 Meadow Glenn  
 City Clarksville State MD Zip Code 21029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33200**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 39
	<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)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A. White, Hollis, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13610 Meadow Glenn  
 City Clarksville State MD Zip Code 21029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 23 / 2021  
**Transaction ID : SA11AI.33201**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**B. Wolfe, Amy, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11220 Chivalry Chase Ln  
 City Spotsylvania State VA Zip Code 22551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2021  
**Transaction ID : SA11AI.33030**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

**C. Wolfe, Amy, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11220 Chivalry Chase Ln  
 City Spotsylvania State VA Zip Code 22551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEICO Occupation (for Individual) AVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.33031**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 37 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wolfe, Amy, M, ,

Mailing Address 11220 Chivalry Chase Ln

City Spotsylvania	State VA	Zip Code 22551
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GEICO	Occupation (for Individual) AVP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

**Transaction ID : SA11AI.33032**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll deduction \$10.00 biweekly

**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  

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

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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> This Period (last page this line number only).....	4435.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAVE JOYCE**

Mailing Address 9856 ARCHER LN

City  
DUBLIN

State  
OH

Zip Code  
43017

Purpose of Disbursement  
Campaign Contribution

011

Category/  
Type

Candidate Name

**FRIENDS OF DAVE JOYCE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 19 / 2021

FEC Identification Number

C C00527457

**Transaction ID : SB23.33291**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Himes For Congress**

Mailing Address 857 Post Road #312

City  
Fairfield

State  
CT

Zip Code  
06824

Purpose of Disbursement  
Campaign Contribution

011

Category/  
Type

Candidate Name

**Higgins For Congress**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) Convention

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 08 / 2021

FEC Identification Number

C

**Transaction ID : SB23.33295**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Huffman for Congress**

Mailing Address P.O.Box 151563

City  
San Rafael

State  
CA

Zip Code  
94915

Purpose of Disbursement  
Campaign Contribution

011

Category/  
Type

Candidate Name

**Huizenga For Congress**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 18 / 2021

FEC Identification Number

C C00459297

**Transaction ID : SB23.33300**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Joe Morelle For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2021

Mailing Address P.O. Box 90914

City Rochester	State NY	Zip Code 14609
-------------------	-------------	-------------------

FEC Identification Number

C [ ]

Transaction ID : SB23.33294

Amount of Each Disbursement this Period

[ ] 2500.00

Purpose of Disbursement  
Campaign Contribution

011
Category/ Type

Candidate Name

**Joe Morelle For Congress**

Office Sought:  House  
 Senate  
 President

State: NY District: [ ]

Disbursement For: 2022

Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

**B. Richard E Neal For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2021

Mailing Address 415 New Jersey Ave SE#1

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC Identification Number

C [ ]

Transaction ID : SB23.33296

Amount of Each Disbursement this Period

[ ] 2500.00

Purpose of Disbursement  
Campaign Contribution

011
Category/ Type

Candidate Name

**Richard E Neal For Congress**

Office Sought:  House  
 Senate  
 President

State: MA District: [ ]

Disbursement For: 2022

Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[ ]		[ ]		[ ]

Mailing Address

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Purpose of Disbursement

[ ]
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District: [ ]

Disbursement For:

Primary  General  
 Other (specify) ▼

Memo Item

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

[ ] 5000.00

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

[ ] 8500.00