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

National Association of Mutual Insurance Companies PAC

ADDRESS (number and street) ▼

3601 Vincennes Road

PO Box 68700

☐ Check if different than previously reported. (ACC)

Indianapolis | IN | 46268 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00170258

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

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

Election on MM / DD / YYYY in the State of

5. Covering Period 03 / 01 / 2015 through 03 / 31 / 2015

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

Type or Print Name of Treasurer Mr. Gregg A. Dykstra J.D.

Signature of Treasurer *Mr. Gregg A. Dykstra J.D.* ***[Electronically Filed]*** Date 04 / 15 / 2015

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

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 03 / 01 / 2015 To: 03 / 01 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		78506.16
(b) Cash on Hand at Beginning of Reporting Period	79356.47	
(c) Total Receipts (from Line 19)	46781.15	117513.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	126137.62	196019.86
7. Total Disbursements (from Line 31)	59641.23	129523.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	66496.39	66496.39
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

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

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 03 / 01 / 2015 To: 03 / 31 / 2015

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)	29839.54	63636.41
(ii) Unitemized	11884.42	43662.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	41723.96	107299.23
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	46723.96	117299.23
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)	50.78	198.47
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6.41	16.00
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)) ▶	46781.15	117513.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	46781.15	117513.70

DETAILED SUMMARY PAGE
of Disbursements

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

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	141.23	273.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	141.23	273.47
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	59500.00	127000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(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	250.00
29. Other Disbursements	0.00	2000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	59641.23	129523.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	59641.23	129523.47

DETAILED SUMMARY PAGE
of Disbursements

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

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46723.96	117299.23
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46723.96	117049.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	141.23	273.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	50.78	198.47
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	90.45	75.00

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

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Cathy M. Adcock

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A3459C2253EEB4834BE4

Amount of Each Receipt this Period: 85.00

B. Full Name (Last, First, Middle Initial)
Ms. Cathy M. Adcock

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : AAEDA22AFDE9B4AF7A6A

Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Mr. Todd E. Albert

Mailing Address PO Box 111

City: Bucyrus | State: OH | Zip Code: 44820-0111

FEC ID number of contributing federal political committee. C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Chief Information Officer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : AA0DD0079C99B49ED813

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Neil Alldredge

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A2F239AF9B2014E3BA25

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Ms. Diane Allen

Mailing Address 6101 Anacapri Blvd

City: Lansing
State: MI
Zip Code: 48917-3968

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : AA0B0E5D6E33A4450BF7

Amount of Each Receipt this Period: 65.00

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

Mailing Address PO Box 618

City: Columbia
State: MO
Zip Code: 65205-0618

FEC ID number of contributing federal political committee.: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : A9A4B8B17C8A74AB896C

Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ▶ 167.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Mr. John S. Benson
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Chairman & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 702.00
Date of Receipt: 03 / 13 / 2015
Transaction ID : AF7B402DE2FBA40F39BC
Amount of Each Receipt this Period: 117.00

B. Full Name (Last, First, Middle Initial): Mr. John S. Benson
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Chairman & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 819.00
Date of Receipt: 03 / 27 / 2015
Transaction ID : AD016C2D73A1E4A50A90
Amount of Each Receipt this Period: 117.00

C. Full Name (Last, First, Middle Initial): Mr. Jonathan Bergner
Mailing Address: 122 C St NW Ste 540
City: Washington | State: DC | Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Federal Affairs Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 03 / 23 / 2015
Transaction ID : ACD378B8C1A174F1180D
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 734.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Ms. Rena Bilodeau

Mailing Address 1460 Wells St

City: Enumclaw
State: WA
Zip Code: 98022-3003

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Vice President - Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A386C3F38226C4B88BD4

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Clarence Boyle Sr.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A10D77CFF05544BE28B1

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. Bykowski

Mailing Address PO Box 819

City: Appleton
State: WI
Zip Code: 54912-0819

FEC ID number of contributing federal political committee.: C

Name of Employer: SECURA Insurance, A Mutual Company
Occupation: Chairman of the Board

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A3AD84A5D61E64C24A2B

Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Ms. Ginny Caro
Mailing Address: 3030 N 3rd St
City: Phoenix State: AZ Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Vice President of Claims Services
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 208.30
Date of Receipt: 03 / 06 / 2015
Transaction ID : A4FD5807B8C2E4A1A909
Amount of Each Receipt this Period: 41.66

B. Full Name (Last, First, Middle Initial): Ms. Ginny Caro
Mailing Address: 3030 N 3rd St
City: Phoenix State: AZ Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Vice President of Claims Services
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 03 / 19 / 2015
Transaction ID : A08F2AB42D0AC4C30860
Amount of Each Receipt this Period: 41.66

C. Full Name (Last, First, Middle Initial): Mr. Charles M. Chamness
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 03 / 02 / 2015
Transaction ID : AC725C90D808C4F5B866
Amount of Each Receipt this Period: 90.00

SUBTOTAL of Receipts This Page (optional) ▶ 173.32

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Charles M. Chamness

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : ABEF4EC070963490C979

Amount of Each Receipt this Period: 90.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles M. Chamness

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A75A0A3499B5E496E9E0

Amount of Each Receipt this Period: 90.00

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

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : AB8D30B93FE4D441D8BC

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 219.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Mr. Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 273.00
Date of Receipt: 03 / 10 / 2015
Transaction ID : AD6385D49C26942428A3
Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial): Mr. Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00
Date of Receipt: 03 / 23 / 2015
Transaction ID : A3B604EFC3822498783E
Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial): Mr. Garrett Cooper
Mailing Address: PO Box 2227
City: Fort Wayne State: IN Zip Code: 46801-2227
FEC ID number of contributing federal political committee: C
Name of Employer: Brotherhood Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 03 / 05 / 2015
Transaction ID : ACE1A9DB1456B4454807
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 328.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

Mailing Address PO Box 37

City: Orion
State: IL
Zip Code: 61273-0037

FEC ID number of contributing federal political committee.: C

Name of Employer: Svea Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 05 / 2015

Transaction ID : AC1AB2E97781F4C56906

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Kevin Day

Mailing Address PO Box 36

City: Wooster
State: OH
Zip Code: 44691-0036

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Reserve Mutual Casualty Compan
Occupation: President and CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 13 / 2015

Transaction ID : A3B50DBB5C70A45889AD

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Dan DeArment PFMM

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 16 / 2015

Transaction ID : AFAFA69A02CF24F058D7

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Rick DeGraw

Mailing Address 3030 N 3rd St

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

FEC ID number of contributing federal political committee.: C

Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Executive Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 208.30

Date of Receipt: 03 / 06 / 2015

Transaction ID : ACC29460F8E4540AC8E2

Amount of Each Receipt this Period: 41.66

B. Full Name (Last, First, Middle Initial)
Mr. Rick DeGraw

Mailing Address 3030 N 3rd St

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

FEC ID number of contributing federal political committee.: C

Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Executive Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 249.96

Date of Receipt: 03 / 19 / 2015

Transaction ID : AF550DF3CE6684DEBA81

Amount of Each Receipt this Period: 41.66

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 217.40

Date of Receipt: 03 / 06 / 2015

Transaction ID : AF8D3FF4051C748E6AEF

Amount of Each Receipt this Period: 43.48

SUBTOTAL of Receipts This Page (optional) ▶ 126.80

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.88

Date of Receipt: 03 / 23 / 2015

Transaction ID : A3F88490006CC4FC888F

Amount of Each Receipt this Period: 43.48

B. Full Name (Last, First, Middle Initial)
Mr. Charles W. Drier

Mailing Address PO Box 3337

City: Peoria
State: IL
Zip Code: 61612-3337

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A106996C3AD5748728EF

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles W. Drier

Mailing Address PO Box 3337

City: Peoria
State: IL
Zip Code: 61612-3337

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : A9174755FAC6D488681B

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 193.48

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Mr. Gregg A. Dykstra J.D.
Mailing Address: 3601 Vincennes Rd
City: Indianapolis
State: IN
Zip Code: 46268-1154
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 384.64
Date of Receipt: 03 / 02 / 2015
Transaction ID : A15FFC94D050B4380813
Amount of Each Receipt this Period: 96.16

B.
Full Name (Last, First, Middle Initial): Mr. Gregg A. Dykstra J.D.
Mailing Address: 3601 Vincennes Rd
City: Indianapolis
State: IN
Zip Code: 46268-1154
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.80
Date of Receipt: 03 / 06 / 2015
Transaction ID : AB5AAAE61E4F243CE8FA
Amount of Each Receipt this Period: 96.16

C.
Full Name (Last, First, Middle Initial): Mr. Gregg A. Dykstra J.D.
Mailing Address: 3601 Vincennes Rd
City: Indianapolis
State: IN
Zip Code: 46268-1154
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 576.96
Date of Receipt: 03 / 23 / 2015
Transaction ID : A1E4CEBF0AC9D409B979
Amount of Each Receipt this Period: 96.16

SUBTOTAL of Receipts This Page (optional) ▶ 288.48

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Fred A. Edmond CPCU, CIC

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt: 03 / 13 / 2015

Transaction ID : AA66871818C114BD4A82

Amount of Each Receipt this Period: 77.00

B. Full Name (Last, First, Middle Initial)
Mr. Fred A. Edmond CPCU, CIC

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 539.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : AB07EB0ABDB56489B851

Amount of Each Receipt this Period: 77.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : AECA30345A05F46A3AC7

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 254.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : A78AE2A763C3D453B8E1

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Ms. Sally Estvanic

Mailing Address PO Box 5001 WE

City: Westfield Center | State: OH | Zip Code: 44251-5001

FEC ID number of contributing federal political committee. C

Name of Employer: Westfield Insurance Company
Occupation: Government Affairs Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : ABBF1CC93258E482BA22

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark H. Ewert

Mailing Address 20935 Swenson Dr Ste 200

City: Waukesha | State: WI | Zip Code: 53186-2057

FEC ID number of contributing federal political committee. C

Name of Employer: Partners Mutual Insurance Company
Occupation: Executive Vice President, Treasurer &

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : A842112474E894543872

Amount of Each Receipt this Period: 110.00

SUBTOTAL of Receipts This Page (optional) ▶ 460.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Stephen F. Fabian

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President, Chief Information Offi

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 333.30

Date of Receipt: 03 / 10 / 2015
Transaction ID : A956CB559905244A79AD

Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial)
Mr. Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Commercial Lines Division Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 06 / 2015
Transaction ID : A78865CE98A184B91AF9

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Commercial Lines Division Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 03 / 18 / 2015
Transaction ID : AE15ACF48BD214B6E940

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 163.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Daniel P. Ferris

Mailing Address 2401 S Memorial Dr

City: Appleton
State: WI
Zip Code: 54915-1429

FEC ID number of contributing federal political committee.: C

Name of Employer: SECURA Insurance, A Mutual Company
Occupation: VP, General Counsel and Assistant Secr

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 03 / D D 03 / Y Y Y Y 2015

Transaction ID : ABB92D20D9B1441ACA21

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Gayle Fisher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Life Operatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: M M 03 / D D 02 / Y Y Y Y 2015

Transaction ID : A77AB0AD980CE474BAB5

Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Ms. Gayle Fisher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Life Operatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: M M 03 / D D 26 / Y Y Y Y 2015

Transaction ID : A0F40B7E9D5844A9FBC4

Amount of Each Receipt this Period: 85.00

SUBTOTAL of Receipts This Page (optional) ▶ 1170.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mr. Brad Fortner PFMM, FMDC

Mailing Address 703 W Poplar St

City: Rogers
State: AR
Zip Code: 72756-4443

FEC ID number of contributing federal political committee: C

Name of Employer: Farmers Protective Mutual Insurance Co
Occupation: Chief Operations Officer/Secretary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 03 / D D 23 / Y Y Y Y 2015

Transaction ID : AE9C1A9344A3F4B469CF

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald Fry

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 03 / D D 03 / Y Y Y Y 2015

Transaction ID : A80E7976EF1474C2B9E7

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Jim Gerber

Mailing Address PO Box 812

City: Hull
State: IA
Zip Code: 51239-0812

FEC ID number of contributing federal political committee: C

Name of Employer: Farmers Mutual Insurance Association o
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 03 / D D 19 / Y Y Y Y 2015

Transaction ID : A54F6A483BB2145D8822

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

A. Full Name (Last, First, Middle Initial): Mr. Bryan Gilleland
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 230.82
Date of Receipt: 03 / 13 / 2015
Transaction ID : A8F81E28F0B534DAB9FF
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Mr. Bryan Gilleland
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 269.29
Date of Receipt: 03 / 27 / 2015
Transaction ID : AD6A94FC3B7F948F4A0C
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Ms. Yvette Gonzales
Mailing Address: 3030 N 3rd St
City: Phoenix | State: AZ | Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Senior Vice President & CIO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 208.30
Date of Receipt: 03 / 06 / 2015
Transaction ID : A8EF91539ABD34B4CA47
Amount of Each Receipt this Period: 41.66

SUBTOTAL of Receipts This Page (optional) ▶ 118.60

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): Ms. Yvette Gonzales
Mailing Address: 3030 N 3rd St
City: Phoenix State: AZ Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Senior Vice President & CIO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 249.96
Date of Receipt: 03 / 19 / 2015
Transaction ID : A8FB5C65E25EF4ED3976
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): Mr. Jimi Grande
Mailing Address: 122 C St NW Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President-Federal and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 454.56
Date of Receipt: 03 / 02 / 2015
Transaction ID : A87CD0645786E4015997
Amount of Each Receipt this Period: 113.64

C.
Full Name (Last, First, Middle Initial): Mr. Jimi Grande
Mailing Address: 122 C St NW Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President-Federal and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 568.20
Date of Receipt: 03 / 06 / 2015
Transaction ID : A18B248F898E644939AB
Amount of Each Receipt this Period: 113.64

SUBTOTAL of Receipts This Page (optional) ▶ 268.94

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Jimi Grande

Mailing Address 122 C St NW Ste 540

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

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President-Federal and Poli

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 681.84

Date of Receipt: 03 / 23 / 2015

Transaction ID : A848959A114EB4689863

Amount of Each Receipt this Period: 113.64

B. Full Name (Last, First, Middle Initial)
Mr. David D. Gross

Mailing Address PO Box 819

City: Appleton
State: WI
Zip Code: 54912-0819

FEC ID number of contributing federal political committee. C

Name of Employer: SECURA Insurance, A Mutual Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A1C06D45181AF4C46860

Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald J. Habegger

Mailing Address 12284 Kiska Cir

City: Blaine
State: MN
Zip Code: 55449-6648

FEC ID number of contributing federal political committee. C

Name of Employer: Brotherhood Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : AC12D177F0D7343BCB01

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 2863.64

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

Mailing Address 122 C St NW Ste 540

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

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: Federal Affairs Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : AD561B8BEDE104531A3D

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Mr. James Hardesty

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A36C55898B9CA4B5CAC6

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Rich Hawkins

Mailing Address 1460 Wells St

City: Enumclaw
State: WA
Zip Code: 98022-3003

FEC ID number of contributing federal political committee. C

Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Vice President, Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A2C24C89E91E54CB8B2C

Amount of Each Receipt this Period: 77.00

SUBTOTAL of Receipts This Page (optional) ▶ 217.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Warren W. Heck

Mailing Address 200 Madison Ave

City: New York | State: NY | Zip Code: 10016-3903

FEC ID number of contributing federal political committee. C

Name of Employer: Greater New York Mutual Insurance Comp
Occupation: Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A429F40463B334933956

Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Mr. F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : A446641A41A9A4CDCBFB

Amount of Each Receipt this Period: 45.00

C. Full Name (Last, First, Middle Initial)
Mr. F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 03 / 18 / 2015

Transaction ID : A511D2CC47E684EDC89A

Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ▶ 2590.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Mr. Rick Jones
Mailing Address: 3030 N 3rd St
City: Phoenix State: AZ Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Executive Vice President, COO & Presid
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 208.35
Date of Receipt: 03 / 06 / 2015
Transaction ID : A78C42BE90D7B413CA26
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Mr. Rick Jones
Mailing Address: 3030 N 3rd St
City: Phoenix State: AZ Zip Code: 85012-3074
FEC ID number of contributing federal political committee: C
Name of Employer: CopperPoint Mutual Insurance Company
Occupation: Executive Vice President, COO & Presid
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.02
Date of Receipt: 03 / 19 / 2015
Transaction ID : A43348F21560244D385F
Amount of Each Receipt this Period: 41.67

C. Full Name (Last, First, Middle Initial): Mr. Thomas Karol
Mailing Address: 122 C St NW Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Federal Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 227.30
Date of Receipt: 03 / 06 / 2015
Transaction ID : A0C4572BEDC1D4FB6ABC
Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 128.80

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Karol

Mailing Address 122 C St NW Ste 540

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

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Federal Affairs Counsel

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 272.76

Date of Receipt: 03 / 23 / 2015
Transaction ID : AF1B31F2456744F2C9FF

Amount of Each Receipt this Period: 45.46

B. Full Name (Last, First, Middle Initial)
Ms. Jami Kelly

Mailing Address One Mutual Avenue

City: Frankenmuth
State: MI
Zip Code: 48787-1000

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 03 / 13 / 2015
Transaction ID : AF5985FC28E71439BAD3

Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Ms. Jami Kelly

Mailing Address One Mutual Avenue

City: Frankenmuth
State: MI
Zip Code: 48787-1000

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt: 03 / 27 / 2015
Transaction ID : AAA7111B1C0C6435F858

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 123.46

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : AE45BF974CECC4B7A959

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Mr. Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : AF05ADB62415A4839974

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Knudsen

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee. C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt: 03 / 13 / 2015

Transaction ID : A9DE94B25B95A434197B

Amount of Each Receipt this Period: 38.00

SUBTOTAL of Receipts This Page (optional) ▶ 188.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Andrew Knudsen

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee. C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : ACC5EFCFA68F14704A98

Amount of Each Receipt this Period: 38.00

B. Full Name (Last, First, Middle Initial)
Mr. Daryl D. Lang

Mailing Address PO Box 340

City: Springville | State: IA | Zip Code: 52336-0340

FEC ID number of contributing federal political committee. C

Name of Employer: Brown Township Mutual Insurance Associ
Occupation: Secretary/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : A29C0FB66F25F4475932

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven D. Linkous

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 416.52

Date of Receipt: 03 / 10 / 2015

Transaction ID : A14EBA8FC6B1A4DE0ADC

Amount of Each Receipt this Period: 208.26

SUBTOTAL of Receipts This Page (optional) ▶ 496.26

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Brian D. Lopata

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: SVP, Profit Center Operations & Custom

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : A76CE677101AC485D9A5

Amount of Each Receipt this Period: 80.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Lopata

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 230.82

Date of Receipt: 03 / 10 / 2015

Transaction ID : A228602A3F52D4B9A8B2

Amount of Each Receipt this Period: 76.94

C. Full Name (Last, First, Middle Initial)
Mr. Wilbur J. Maas PFMM

Mailing Address PO Box 812

City: Hull
State: IA
Zip Code: 51239-0812

FEC ID number of contributing federal political committee.: C

Name of Employer: Farmers Mutual Insurance Association o
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 19 / 2015

Transaction ID : AFC5E8A8AFDD74AB99F5

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1156.94

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Sammy Mah

Mailing Address 1222 1/2 Cooksie Street

City: Baltimore
State: MD
Zip Code: 21230-5231

FEC ID number of contributing federal political committee. C

Name of Employer: Brotherhood Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : A9C37610DFC10411FA76

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Diane Marshall

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A85254CF993C3434DB91

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Diane Marshall

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : A6C4C5D084F6A4B5298C

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Mr. Phil McCain
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 230.82
Date of Receipt: 03 / 13 / 2015
Transaction ID : A390F3CC173BE42259F2
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Mr. Phil McCain
Mailing Address: One Mutual Avenue
City: Frankenmuth | State: MI | Zip Code: 48787-1000
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 269.29
Date of Receipt: 03 / 27 / 2015
Transaction ID : AA988341834844577AB2
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Mr. Robert McDorman
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 / 03 / 2015
Transaction ID : A07BB542B3CF0463888B
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 176.94

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 02 / 2015
Transaction ID : A67C5851EACA94F15BEA

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Ms. Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2015
Transaction ID : A40A64D13FB1F4CD6A65

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Brian S. McLeod

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 03 / 13 / 2015
Transaction ID : A7012027A360347D4874

Amount of Each Receipt this Period: 38.50

SUBTOTAL of Receipts This Page (optional) ▶ 188.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Brian S. McLeod

Mailing Address One Mutual Avenue

City: Frankenmuth
State: MI
Zip Code: 48787-1000

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 269.50

Date of Receipt: 03 / 27 / 2015

Transaction ID : A16771F576DE941E9877

Amount of Each Receipt this Period: 38.50

B. Full Name (Last, First, Middle Initial)
Mr. Albert Mezzanotte Jr.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A94441D722DD54A3DA0B

Amount of Each Receipt this Period: 100.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A6C755BCDEBDD4CFD8E0

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 178.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Ms. Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt: 03 / 03 / 2015
Transaction ID : A980FAFB10A2946EAB5E
Amount of Each Receipt this Period: 45.00

B.
Full Name (Last, First, Middle Initial): Ms. Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00
Date of Receipt: 03 / 10 / 2015
Transaction ID : AEFD1EDA926244BF8A04
Amount of Each Receipt this Period: 45.00

C.
Full Name (Last, First, Middle Initial): Ms. Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 03 / 23 / 2015
Transaction ID : A15F0529BB1174302B91
Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ▶ 135.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Addison Mugo

Mailing Address 10409 S 50th Pl Ste 100

City: Phoenix
State: AZ
Zip Code: 85044-5214

FEC ID number of contributing federal political committee. C

Name of Employer: Western National Assurance Company
Occupation: Vice President - Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2015
Transaction ID : A092B133E57C64F12866

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President - Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 02 / 2015
Transaction ID : AF91283DB84EC4C14B02

Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Ms. Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President - Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 03 / 26 / 2015
Transaction ID : AEF36D7FC7C4F4622888

Amount of Each Receipt this Period: 85.00

SUBTOTAL of Receipts This Page (optional) ▶ 420.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Mikel B. Nelson

Mailing Address PO Box 250

City: Upsala
State: MN
Zip Code: 56384-0250

FEC ID number of contributing federal political committee.: C

Name of Employer: Elmdale Farmers Mutual Insurance, Inc.
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : A96A6221CEAD74BF7B99

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Eric Nelson

Mailing Address 1460 Wells St

City: Enumclaw
State: WA
Zip Code: 98022-3003

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A5782E438966448BB88E

Amount of Each Receipt this Period: 250.00

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 333.32

Date of Receipt: 03 / 10 / 2015

Transaction ID : AA5CDD4B3ED3A44B7BC5

Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 1333.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Sandra G. Parrillo CPCU

Mailing Address PO Box 6066

City: Providence
State: RI
Zip Code: 02940-6066

FEC ID number of contributing federal political committee.: C

Name of Employer: Providence Mutual Fire Insurance Compa
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : A0FE888B22AFD414A95B

Amount of Each Receipt this Period: 90.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Peters

Mailing Address 118 Downtown Plz

City: Fairmont
State: MN
Zip Code: 56031-1709

FEC ID number of contributing federal political committee.: C

Name of Employer: Fairmont Farmers Mutual Insurance Comp
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : A406C4F1134FF4FED94A

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary S. Pierce

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 233.32

Date of Receipt: 03 / 26 / 2015

Transaction ID : A7861C336003443A2878

Amount of Each Receipt this Period: 58.33

SUBTOTAL of Receipts This Page (optional) ▶ 398.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Doug Reuhl

Mailing Address 1900 S 18th Ave

City: West Bend
State: WI
Zip Code: 53095-8796

FEC ID number of contributing federal political committee.: C

Name of Employer: West Bend Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 30 / 2015

Transaction ID : A2B831EB8E57D495689F

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Steve Richards

Mailing Address PO Box 1463

City: Minneapolis
State: MN
Zip Code: 55440-1463

FEC ID number of contributing federal political committee.: C

Name of Employer: Western National Mutual Insurance Comp
Occupation: Vice President- Western Regional Manag

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 30 / 2015

Transaction ID : A74AD80E7039743AA8E8

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt: 03 / 02 / 2015

Transaction ID : ADD9267FCDA5A442CBCC

Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ▶ 583.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 333.32

Date of Receipt: 03 / 26 / 2015

Transaction ID : AA0EB238438F845B5A7E

Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial)
Mr. Mark O. Roberts Jr.

Mailing Address PO Box 19267

City: Springfield | State: IL | Zip Code: 62794-9267

FEC ID number of contributing federal political committee: C

Name of Employer: Standard Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : AA44548D4C1C54489809

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark Robison CPA, CPCU,

Mailing Address PO Box 2227

City: Fort Wayne | State: IN | Zip Code: 46801-2227

FEC ID number of contributing federal political committee: C

Name of Employer: Brotherhood Mutual Insurance Company
Occupation: Chairman and President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : AEED7CDAC2F5E4A11850

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 833.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial): Spencer M. Roman ACAS, MAAA
Mailing Address: 355 Maple Ave
City: Harleysville State: PA Zip Code: 19438-2222
FEC ID number of contributing federal political committee: C
Name of Employer: Harleysville Mutual Insurance Company
Occupation: Executive Vice President , Field Opera
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 / 03 / 2015
Transaction ID : AA0E4D0C577D74111B63
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Mr. Brian Sadler
Mailing Address: PO Box 812
City: Hull State: IA Zip Code: 51239-0812
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Mutual Insurance Association o
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 19 / 2015
Transaction ID : A8D18F57E64504AB1B69
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Mr. Timothy B. Salge
Mailing Address: 309 E San Antonio St
City: New Braunfels State: TX Zip Code: 78130-4537
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Mutual Fire Insurance Associat
Occupation: President/General Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 20 / 2015
Transaction ID : A01A30FF557D6497A99C
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Stephen Scott

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015
Transaction ID : A462FDC03327747809CF

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Kent B. Shantz

Mailing Address PO Box 5626

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

FEC ID number of contributing federal political committee. C

Name of Employer: Rockford Mutual Insurance Company
Occupation: COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 03 / 03 / 2015
Transaction ID : A1B236B779E124F9BA15

Amount of Each Receipt this Period: 77.00

C. Full Name (Last, First, Middle Initial)
Mr. Kent B. Shantz

Mailing Address PO Box 5626

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

FEC ID number of contributing federal political committee. C

Name of Employer: Rockford Mutual Insurance Company
Occupation: COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt: 03 / 30 / 2015
Transaction ID : A17C96152064F4427A63

Amount of Each Receipt this Period: 77.00

SUBTOTAL of Receipts This Page (optional) ▶ 254.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Donald A. Smith Jr.

Mailing Address 3030 N 3rd St

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

FEC ID number of contributing federal political committee.: C

Name of Employer: CopperPoint Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : AE9717CAB47DE41AB8C0

Amount of Each Receipt this Period: 105.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald A. Smith Jr.

Mailing Address 3030 N 3rd St

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

FEC ID number of contributing federal political committee.: C

Name of Employer: CopperPoint Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 03 / 19 / 2015

Transaction ID : A782B9A557A774C6A844

Amount of Each Receipt this Period: 105.00

C. Full Name (Last, First, Middle Initial)
Ms. Abigail Smith

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 03 / 2015

Transaction ID : A1498BD5FDDD54998A85

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 310.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. John K. Smith CRM, CIC,

Mailing Address 2005 Market St Ste 1200

City: Philadelphia
State: PA
Zip Code: 19103-7008

FEC ID number of contributing federal political committee. C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 03 / 17 / 2015

Transaction ID : A9535226AC9014E78877

Amount of Each Receipt this Period: 190.00

B. Full Name (Last, First, Middle Initial)
Ms. Irica Solomon

Mailing Address 122 C St NW Ste 540

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

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President of Federal and Politica

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 227.30

Date of Receipt: 03 / 06 / 2015

Transaction ID : AF933783A29214A64B39

Amount of Each Receipt this Period: 45.46

C. Full Name (Last, First, Middle Initial)
Ms. Irica Solomon

Mailing Address 122 C St NW Ste 540

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

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President of Federal and Politica

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 272.76

Date of Receipt: 03 / 23 / 2015

Transaction ID : A1AD81317721648C4A6E

Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 280.92

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt: 03 / 02 / 2015

Transaction ID : A997BAAC0DA874844B58

Amount of Each Receipt this Period: 96.15

B. Full Name (Last, First, Middle Initial)
Mr. Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.75

Date of Receipt: 03 / 06 / 2015

Transaction ID : ACBF9CE1BAD234A3595C

Amount of Each Receipt this Period: 96.15

C. Full Name (Last, First, Middle Initial)
Mr. Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 576.90

Date of Receipt: 03 / 23 / 2015

Transaction ID : AA7FC876690AC4728B2B

Amount of Each Receipt this Period: 96.15

SUBTOTAL of Receipts This Page (optional) ▶ 288.45

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Douglas M. Sullivan CIC, PFMM

Mailing Address PO Box 37

City: Orion
State: IL
Zip Code: 61273-0037

FEC ID number of contributing federal political committee.: C

Name of Employer: Svea Mutual Insurance Company
Occupation: Manager/Secretary/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 05 / 2015

Transaction ID : AF7EB236A0BAF4832AD1

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Terry Suttner

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Membership/Insurance

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : AC5EFC0FB6CD044D790D

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
Ms. Susan K. Taggart PFMM

Mailing Address PO Box 68

City: Remington
State: IN
Zip Code: 47977-0068

FEC ID number of contributing federal political committee.: C

Name of Employer: Remington Farmers Mutual Insurance Com
Occupation: CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2015

Transaction ID : AC35C26E6A6B74D0294F

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 840.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Tagsold

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 02 / 2015
Transaction ID : AE5C78A6099404DC18C7

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Tagsold

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 26 / 2015
Transaction ID : AD5BD5F44AD6E40AD9B2

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Thelen

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 02 / 2015
Transaction ID : A140862C1CD7F4E5C804

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 275.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Thelen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Senior Vice President of Human Resourc

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : AD0EB3C4F775146C3893

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe Thesing

Mailing Address PO Box 68700

City: Indianapolis | State: IN | Zip Code: 46268-0700

FEC ID number of contributing federal political committee: C

Name of Employer: National Association of Mutual Insuran

Occupation: Vice President - State Affairs

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A2B3B1879DE7F4C48944

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce D. Thomas PFMM

Mailing Address PO Box 594

City: Algona | State: IA | Zip Code: 50511-0594

FEC ID number of contributing federal political committee: C

Name of Employer: Heartland Mutual Insurance Association

Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 16 / 2015

Transaction ID : AC11F4A1ECCB64FE4B2A

Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 315.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Gary W. Thompson CPCU, CIC

Mailing Address PO Box 618

City: Columbia | State: MO | Zip Code: 65205-0618

FEC ID number of contributing federal political committee: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A5CBAB3B1BD454BDCAE

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary W. Thompson CPCU, CIC

Mailing Address PO Box 618

City: Columbia | State: MO | Zip Code: 65205-0618

FEC ID number of contributing federal political committee: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : A6A5FB2F97B2D49DCBBD

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Randall Trinklein

Mailing Address One Mutual Avenue

City: Frankenmuth | State: MI | Zip Code: 48787-1000

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 03 / 13 / 2015

Transaction ID : A3C47A7004EAB4BC4BCE

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 539.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Randall Trinklein

Mailing Address One Mutual Avenue

City: Frankenmuth
State: MI
Zip Code: 48787-1000

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : AFED855ACE56E488F8C3

Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Mr. Aaron J. Valentine

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 10 / 2015

Transaction ID : AC8519D45C44740F6BD9

Amount of Each Receipt this Period: 80.00

C. Full Name (Last, First, Middle Initial)
Mr. Ian R. Ward

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A9E29CCF352344558847

Amount of Each Receipt this Period: 70.00

SUBTOTAL of Receipts This Page (optional) ▶ 189.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Ian R. Ward

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company

Occupation: Senior Vice President, Investments and

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : AFB3C82983B26403CA8C

Amount of Each Receipt this Period: 70.00

B. Full Name (Last, First, Middle Initial)
Mr. Mick Ware

Mailing Address PO Box 5555

City: Meridian | State: ID | Zip Code: 83680-5555

FEC ID number of contributing federal political committee. C

Name of Employer: United Heritage Property & Casualty Co

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 13 / 2015

Transaction ID : A5F8F9BED53A34758B13

Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark Wenger

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company

Occupation: Assistant Vice President and Chief P&C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : AF45281CF578841E892D

Amount of Each Receipt this Period: 84.00

SUBTOTAL of Receipts This Page (optional) ▶ 2654.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

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

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President and Chief P&C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 03 / 27 / 2015

Transaction ID : A66BF339FD4564F9BA32

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
Mr. William Woodbury

Mailing Address 6101 Anacapri Blvd

City: Lansing | State: MI | Zip Code: 48917-3968

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: SVP, Secretary & General Counsel

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.01

Date of Receipt: 03 / 02 / 2015

Transaction ID : AE655216012354CB4828

Amount of Each Receipt this Period: 91.67

C. Full Name (Last, First, Middle Initial)
Mr. William Woodbury

Mailing Address 6101 Anacapri Blvd

City: Lansing | State: MI | Zip Code: 48917-3968

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: SVP, Secretary & General Counsel

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 366.68

Date of Receipt: 03 / 26 / 2015

Transaction ID : AB24936163C074CB28ED

Amount of Each Receipt this Period: 91.67

SUBTOTAL of Receipts This Page (optional) ▶ 267.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Ann Zabel PFMM

Mailing Address PO Box 69

City: Saint Clair | State: MN | Zip Code: 56080-0069

FEC ID number of contributing federal political committee. C

Name of Employer: McPherson Minnesota Lake Mutual Insura
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2015

Transaction ID : ABC96CEF0AB61413FBEC

Amount of Each Receipt this Period: 250.00

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

Mailing Address PO Box 708

City: Houston | State: MN | Zip Code: 55943-0708

FEC ID number of contributing federal political committee. C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 23 / 2015

Transaction ID : A52394AF4D31D4DE4B8A

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Peter Ziegler

Mailing Address 1900 S 18th Ave

City: West Bend | State: WI | Zip Code: 53095-8796

FEC ID number of contributing federal political committee. C

Name of Employer: West Bend Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2015

Transaction ID : A8BABF711796240A4B7D

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

TOTAL This Period (last page this line number only) ▶ 29839.54

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)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.
Full Name (Last, First, Middle Initial)
Westfield Federal Employee Political Action Committee of Ohio Farmers Insurance Company

Mailing Address One Park Circle
PO Box 5001

City: Westfield Center
State: OH
Zip Code: 44251

FEC ID number of contributing federal political committee. C C00376863

Name of Employer
Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : A679C2D7D51734CDE810

Amount of Each Receipt this Period: 5000.00

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

Mailing Address

City
State
Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City
State
Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

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

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

A.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 Michigan Rd
City: Indianapolis State: IN Zip Code: 46268-3141
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 16.00
Date of Receipt: 03 / 31 / 2015
Transaction ID : AFDDF63568D574172A6B
Amount of Each Receipt this Period: 0.07
Bank Interest

B.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 Michigan Rd
City: Indianapolis State: IN Zip Code: 46268-3141
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 16.00
Date of Receipt: 03 / 31 / 2015
Transaction ID : A524B018A666547A4AFF
Amount of Each Receipt this Period: 6.34
Bank Interest

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 6.41

TOTAL This Period (last page this line number only) ▶ 6.41

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): American Express
Mailing Address: PO Box 981540
City: El Paso State: TX Zip Code: 79998-1540
Purpose of Disbursement: Credit Card Processing Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 03 / D D 17 / Y Y Y Y 2015
Transaction ID : B7E88577B7BB640CE96D
Amount of Each Disbursement this Period: 3.25

B. Full Name (Last, First, Middle Initial): Aristotle
Mailing Address: 205 Pennsylvania Ave SE
City: Washington State: DC Zip Code: 20003-1164
Purpose of Disbursement: Credit Card Processing Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 03 / D D 06 / Y Y Y Y 2015
Transaction ID : B77AAE0EF344F4755A20
Amount of Each Disbursement this Period: 22.50

C. Full Name (Last, First, Middle Initial): Aristotle
Mailing Address: 205 Pennsylvania Ave SE
City: Washington State: DC Zip Code: 20003-1164
Purpose of Disbursement: Credit Card Processing Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 03 / D D 13 / Y Y Y Y 2015
Transaction ID : B492A0715BDCE4CDE84E
Amount of Each Disbursement this Period: 25.00

SUBTOTAL of Disbursements This Page (optional) ▶ 50.75

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

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

A.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 Michigan Rd
City: Indianapolis State: IN Zip Code: 46268-3141
Purpose of Disbursement: Credit Card Processing Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 03 / D D 02 / Y Y Y Y 2015
Transaction ID : B8533F28159B2482DB77
Amount of Each Disbursement this Period: 90.48

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 90.48

TOTAL This Period (last page this line number only) ▶ 141.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
ANDY BARR FOR CONGRESS, INC.

Mailing Address PO BOX 2059

City: LEXINGTON State: KY Zip Code: 40588

Purpose of Disbursement: VOID - Political Contribution

Candidate Name: Rep. Andy Barr IV

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: KY District: 06

Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 03 / 09 / 2015

Transaction ID : B00EE0CEC156640E2B36

Amount of Each Disbursement this Period: -1000.00

B. Full Name (Last, First, Middle Initial)
BOB GOODLATTE FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 292

City: ROANOKE State: VA Zip Code: 24002

Purpose of Disbursement: Political Contribution

Candidate Name: Rep. Bob W. Goodlatte

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: VA District: 06

Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 03 / 18 / 2015

Transaction ID : BC38C3A10C80E42279F1

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
CARLOS CURBELO CONGRESS

Mailing Address 8770 SUNSET DRIVE #355

City: MIAMI State: FL Zip Code: 33173

Purpose of Disbursement: Political Contribution

Candidate Name: Rep. Carlos L. Curbelo

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: FL District: 26

Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 03 / 18 / 2015

Transaction ID : B7ACFAA6417FB46DA85F

Amount of Each Disbursement this Period: 2000.00

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

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

A. Full Name (Last, First, Middle Initial): CITIZENS FOR WATERS
Mailing Address: 3700 WILSHIRE BLVD., STE. 1050-B
City: LOS ANGELES State: CA Zip Code: 90010
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Maxine Waters
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 43
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 03 / D D 18 / Y Y Y Y 2015
Transaction ID : B6162BC988D4244EAAC6
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Cleaver for Congress
Mailing Address: 4801 Main Street, Stuite 1000
City: Kansas City State: MO Zip Code: 64112
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Emanuel Cleaver II
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 03 / D D 18 / Y Y Y Y 2015
Transaction ID : B9DABC0DC012D4E9B84C
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): COMMITTEE TO RE-ELECT LINDA SANCHEZ
Mailing Address: 410 1ST ST SE SUITE 310
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement: CA US House
Candidate Name: Rep. Linda T. Sanchez
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 38
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 03 / D D 27 / Y Y Y Y 2015
Transaction ID : B8D57215FC943494AAA6
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
DEMOCRATS WIN SEATS (DWS PAC)

Mailing Address 1071 TWIN BRANCH LN

City: Weston | State: FL | Zip Code: 33326-2828

Purpose of Disbursement: Political Contribution

Candidate Name:

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) ▼ Other2015

Date of Disbursement: 03 / 27 / 2015

Transaction ID : B5C9F01DCC5664A969FA

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Dold for Congress

Mailing Address PO BOX 6312

City: Libertyville | State: IL | Zip Code: 60048-6312

Purpose of Disbursement: Political Contribution

Candidate Name: Rep. Robert J. Dold Jr.

Category/Type:

Office Sought: ☒ House ☐ Senate ☐ President

State: IL District: 10

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 03 / 18 / 2015

Transaction ID : B07AADE8B7D0847CA9CE

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

City: MANCHESTER | State: NH | Zip Code: 03105

Purpose of Disbursement: NH US House

Candidate Name: Rep. Frank C. Guinta

Category/Type:

Office Sought: ☒ House ☐ Senate ☐ President

State: NH District: 01

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 03 / 27 / 2015

Transaction ID : B1E905211EC90434C8D5

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 10500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): FRIENDS OF JOHN DELANEY
Mailing Address: PO BOX 60320
City: POTOMAC State: MD Zip Code: 20859
Purpose of Disbursement: MD US House
Candidate Name: Rep. John K. Delaney
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 06
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B4AF432FEAB9C41DD880
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Friends of John Thune
Mailing Address: PO Box 841
City: Sioux Falls State: SD Zip Code: 57101
Purpose of Disbursement: Political Contribution
Candidate Name: Sen. John Thune
Office Sought: ☐ House ☒ Senate ☐ President
State: SD District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : BD5C82EECEE1C410AA6A
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Friends of Kelly Ayotte
Mailing Address: PO Box 937
City: Manchester State: NH Zip Code: 03105
Purpose of Disbursement: Political Contribution
Candidate Name: Sen. Kelly A. Ayotte
Office Sought: ☐ House ☒ Senate ☐ President
State: NH District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B726FDE715E244582980
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): FRIENDS OF PATRICK MURPHY
Mailing Address: 4521 PGA BLVD. #412
City: PALM BEACH GARDENS State: FL Zip Code: 33418
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Patrick E. Murphy
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B23893CBDD15A46BA8BB
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Friends of Sherrod Brown
Mailing Address: PO Box 76187
City: Washington State: DC Zip Code: 20013
Purpose of Disbursement: Political Contribution
Candidate Name: Sen. Sherrod C. Brown
Office Sought: ☐ House ☒ Senate ☐ President
State: OH District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B547F1B427B034229A68
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): ISSA FOR CONGRESS
Mailing Address: PO BOX 760
City: VISTA State: CA Zip Code: 92085
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Darrell E. Issa
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 49
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : BF118F85CBCF6405DBE0
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Jobs, Economy and Budget Fund (JEB FUND)

Mailing Address PO Box 30844

City: Bethesda State: MD Zip Code: 20824

Purpose of Disbursement: Political Contribution

Candidate Name:

Category/Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: 2015
Primary / General / [X] Other (specify) ▼ Other2015

Date of Disbursement: 03 / 27 / 2015

Transaction ID : BD5833983B5154AD9B85

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City: SHELBYVILLE State: IN Zip Code: 46176

Purpose of Disbursement: Political Contribution

Candidate Name: Rep. Luke Messer

Category/Type:

Office Sought: [X] House / Senate / President

State: IN District: 06

Disbursement For: 2016
[X] Primary / General / Other (specify) ▼

Date of Disbursement: 03 / 18 / 2015

Transaction ID : B0CA1F71FBFB742C39BA

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City: Lyndora State: PA Zip Code: 16045-0476

Purpose of Disbursement: VOID - Political Contribution

Candidate Name: Rep. Mike Kelly Jr.

Category/Type:

Office Sought: [X] House / Senate / President

State: PA District: 03

Disbursement For: 2014
[X] Primary / General / Other (specify) ▼

Date of Disbursement: 03 / 09 / 2015

Transaction ID : BCB6CB7366EDF4E53930

Amount of Each Disbursement this Period: -2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): MODERATE DEMOCRATS PAC
Mailing Address: 303 MASSACHUSETTS AVENUE, NE
City: Washington State: DC Zip Code: 20002-5701
Purpose of Disbursement: Political Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Other2015
Date of Disbursement: 03 / 27 / 2015
Transaction ID : BFE948647CCB642218D1
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): MOORE FOR CONGRESS
Mailing Address: PO BOX 16646
City: MILWAUKEE State: WI Zip Code: 53216
Purpose of Disbursement: VOID - Political Contribution
Candidate Name: Rep. Gwen S. Moore
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 04
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 03 / 09 / 2015
Transaction ID : B93E5E00D5CC242C19CF
Amount of Each Disbursement this Period: -2500.00

C. Full Name (Last, First, Middle Initial): MULVANEY FOR CONGRESS
Mailing Address: P.O. BOX 1975
City: LANCASTER State: SC Zip Code: 29721
Purpose of Disbursement: SC US House
Candidate Name: Rep. Mick Mulvaney
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: SC District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B7291EAF91B6A4595980
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
People for Enterprise Trade and Economic Growth (PETE PAC)

Mailing Address 7804 Evening Lane

City: Alexandria State: VA Zip Code: 22306

Purpose of Disbursement: VOID - Political Contribution

Candidate Name:

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼ Other2014

Date of Disbursement: 03 / 09 / 2015

Transaction ID : BFDB12E23AE1B42088EB

Amount of Each Disbursement this Period: -2500.00

B. Full Name (Last, First, Middle Initial)
PETERS FOR MICHIGAN

Mailing Address PO BOX 226

City: Bloomfield Hills State: MI Zip Code: 48303-0226

Purpose of Disbursement: Political Contribution

Candidate Name: Sen. Gary C. Peters

Category/Type:

Office Sought: ☐ House ☒ Senate ☐ President

State: MI District:

Disbursement For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 03 / 27 / 2015

Transaction ID : B6B3E4E56C38343F096B

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
POLIQUIN FOR CONGRESS

Mailing Address PO BOX 50

City: OAKLAND State: ME Zip Code: 04963

Purpose of Disbursement: ME US House

Candidate Name: Rep. Bruce L. Poliquin

Category/Type:

Office Sought: ☒ House ☐ Senate ☐ President

State: ME District: 02

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 03 / 27 / 2015

Transaction ID : BEA94188C47C54FF3B3A

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Randy Hultgren for Congress
Mailing Address: PO Box 717
City: St Charles State: IL Zip Code: 60174
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Randy M. Hultgren
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 14
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B24C6BB545C744740998
Amount of Each Disbursement this Period: 4000.00

B. Full Name (Last, First, Middle Initial): Republican Mainstreet Partnership Pac
Mailing Address: C/O G & W 2201 Wisconsin Ave., NW Suite 320
City: Washington State: DC Zip Code: 20007
Purpose of Disbursement: Political Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) Other2015
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B8FA2753056794EA8B7F
Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Ron Johnson for Senate Inc
Mailing Address: 219 E Washington Ave Suite 101
City: Oshkosh State: WI Zip Code: 54901
Purpose of Disbursement: Political Contribution
Candidate Name: Sen. Ron H. Johnson
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: WI District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B12B6177430E84544AE6
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 11500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Schock for Congress
Mailing Address: PO Box 10555
City: Peoria State: IL Zip Code: 61612
Purpose of Disbursement: VOID - Political Contribution
Candidate Name: Rep. Aaron J. Schock
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 18
Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)
Category/Type:
Date of Disbursement: 03 / 17 / 2015
Transaction ID : B8670B38ADD044D579FB
Amount of Each Disbursement this Period: -2500.00

B. Full Name (Last, First, Middle Initial): SCOTT PAC
Mailing Address: PO Box 905
City: Newton State: NJ Zip Code: 07860-0905
Purpose of Disbursement: Political Contribution
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2015 [ ] Primary [ ] General [X] Other (specify) Other2015
Category/Type:
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B6423FBA481844C1ABBC
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): SEAN PATRICK MALONEY FOR CONGRESS
Mailing Address: PO BOX 270
City: Newburgh State: NY Zip Code: 12551-0270
Purpose of Disbursement: NY US House
Candidate Name: Rep. Sean P. Maloney
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 18
Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)
Category/Type:
Date of Disbursement: 03 / 27 / 2015
Transaction ID : B02E53BFFA2AA45CAAF0
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A.
Full Name (Last, First, Middle Initial): Shelby for U S Senate
Mailing Address: Post Office Box 1091
City: Tuscaloosa State: AL Zip Code: 35403
Purpose of Disbursement: Political Contribution
Candidate Name: Sen. Richard C. Shelby
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: AL District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B42A314BE791F442C847
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Steve Fincher for Congress
Mailing Address: PO Box 11153
City: Jackson State: TN Zip Code: 38308
Purpose of Disbursement: Political Contribution
Candidate Name: Rep. Stephen L. Fincher
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 08
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 18 / 2015
Transaction ID : B587DB773E6174C53B9B
Amount of Each Disbursement this Period: 2500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

TOTAL This Period (last page this line number only) ▶ 59500.00