

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 WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 7 HANOVER SQUARE Check if different than previously reported. (ACC) NEW YORK NY 10004

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00418731 3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2015 through 12 / 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 Rob Eden

Signature of Treasurer Rob Eden [Electronically Filed] Date 02 / 18 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		33574.56
(b) Cash on Hand at Beginning of Reporting Period.....	29223.97	
(c) Total Receipts (from Line 19)	3573.75	3573.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32797.72	37148.31
7. Total Disbursements (from Line 31).....	3561.76	7912.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29235.96	29235.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 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).....	3040.00	3040.00
(ii) Unitemized	323.75	323.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3363.75	3363.75
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3363.75	3363.75
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	210.00	210.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3573.75	3573.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3573.75	3573.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	791.76	1642.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	791.76	1642.35
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	4500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1770.00	1770.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1770.00	1770.00
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3561.76	7912.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3561.76	7912.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3363.75	3363.75
34. Total Contribution Refunds (from Line 28(d))	1770.00	1770.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1593.75	1593.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	791.76	1642.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	210.00	210.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	581.76	1432.35

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

A. Ronald L Alexander
 Full Name (Last, First, Middle Initial)
 Mailing Address 1604 Bingham Dr
 City Knoxville State TN Zip Code 37922-8066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Willis of Tennessee, Inc. Occupation Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2015
Transaction ID : 441-P4147
 Amount of Each Receipt this Period 499.92
 Memo Item
 Payroll Deduction (\$20.83 Semi-Monthly)

B. Deneen M Huber
 Full Name (Last, First, Middle Initial)
 Mailing Address 3607 Northridge Dr
 City Allison Park State PA Zip Code 15101-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Willis Americas Administration, Inc. Occupation Senior Resource Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2015
Transaction ID : 441-P4148
 Amount of Each Receipt this Period 1000.08
 Memo Item
 Payroll Deduction (\$41.67 Semi-Monthly)

C. Todd J. Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 637 Goose Neck Dr
 City Lititz State PA Zip Code 17543-8368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Willis North America, Inc. Occupation President WNA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2015
Transaction ID : 441-P4149
 Amount of Each Receipt this Period 499.92
 Memo Item
 Payroll Deduction (\$20.83 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1999.92
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:	PAGE 7 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

A. Jay M. Kirschbaum
Full Name (Last, First, Middle Initial)

Mailing Address 1520 Woodroyal East Dr

City State Zip Code
Chesterfield MO 63017-5550

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

Name of Employer Occupation
Willis Americas Administration, Inc. Consulting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : 441-P4150

Amount of Each Receipt this Period
1000.08

Memo Item
Payroll Deduction
(\$41.67 Semi-Monthly)

B. Gary M Windt
Full Name (Last, First, Middle Initial)

Mailing Address 707 S School St

City State Zip Code
Lombard IL 60148-3620

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

Name of Employer Occupation
Willis of Minnesota, Inc. Strategic Mkt Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : 441-P4151

Amount of Each Receipt this Period
40.00

Memo Item
Payroll Deduction
(\$10.00 Semi-Monthly)

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 Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1040.08
TOTAL This Period (last page this line number only).....	3040.00

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

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

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2015

Transaction ID : 452

Amount of Each Receipt this Period
210.00

Memo Item refund

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 Y Y

Amount of Each Receipt this Period

Memo Item

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 Y Y

Amount of Each Receipt this Period

Memo Item

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2015

Transaction ID : 411

Amount of Each Disbursement this Period

170.83

Memo Item

Full Name (Last, First, Middle Initial)

B. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : 412

Amount of Each Disbursement this Period

123.65

Memo Item

Full Name (Last, First, Middle Initial)

C. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : 413

Amount of Each Disbursement this Period

125.06

Memo Item

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

419.54

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2015

Transaction ID : 414

Amount of Each Disbursement this Period

123.76

Memo Item

Full Name (Last, First, Middle Initial)

B. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2015

Transaction ID : 415

Amount of Each Disbursement this Period

124.56

Memo Item

Full Name (Last, First, Middle Initial)

C. SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement
Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2015

Transaction ID : 421

Amount of Each Disbursement this Period

123.90

Memo Item

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

372.22

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

791.76

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

PAUL D. RYAN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : 416

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Deneen Huber

Mailing Address 375 South End Ave AptK

City New York State NY Zip Code 10280

Purpose of Disbursement Refund

010

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2015

Transaction ID : 447

Amount of Each Disbursement this Period

500.04

Memo Item

Full Name (Last, First, Middle Initial)

B. Gary Windt

Mailing Address 707 S School St

City Lombard State IL Zip Code 60148

Purpose of Disbursement Refund

010

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2015

Transaction ID : 445

Amount of Each Disbursement this Period

120.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jay Kirschbaum

Mailing Address 1520 Woodroyal East Dr

City Chesterfield State TN Zip Code 63017

Purpose of Disbursement Refund

010

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2015

Transaction ID : 444

Amount of Each Disbursement this Period

500.04

Memo Item

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

1120.08

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Kenneth Vincent

Mailing Address 10419 Greenhedges Drive

City Tampa State FL Zip Code 33626

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : 449

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Ron Alexander

Mailing Address 1604 Bingham Dr

City Knoxville State TN Zip Code 37922

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : 443

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Scot Housh

Mailing Address 4209 Country Club Rd

City Edina State MN Zip Code 55424

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : 446

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Todd Jones

Mailing Address 713 Honey Farm Road

City Lititz State PA Zip Code 17543

Purpose of Disbursement
Refund

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 448

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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