

**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

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

ADDRESS (number and street)

8700 West Bryn Mawr

Suite 1200S

☐ Check if different than previously reported. (ACC)

Chicago

IL

60631-3512

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00066472

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2014

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

Type or Print Name of Treasurer June T. Holmes

Signature of Treasurer

June T. Holmes

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 09 2014

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y 09 / 01 / 2014 To: M M / D D / Y Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		171710.31
(b) Cash on Hand at Beginning of Reporting Period.....	125250.65	
(c) Total Receipts (from Line 19) .....	25588.16	415367.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	150838.81	587077.96
7. Total Disbursements (from Line 31) .....	70550.31	506789.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	80288.50	80288.50
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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)

Page 3

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

To:

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

17042.42

286283.03

(ii) Unitemized .....

6220.43

63343.56

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

23262.85

349626.59

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

58250.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

23262.85

407876.59

## 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).....

200.31

5366.06

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

2125.00

2125.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

25588.16

415367.65

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

25588.16

415367.65

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	200.31	5339.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	200.31	5339.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54000.00	443400.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	16350.00	58050.00
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)) ..	70550.31	506789.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70550.31	506789.46

**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) .....	23262.85	407876.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23262.85	407876.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	200.31	5339.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	200.31	5366.06
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	-26.60

# **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 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Kristina Baldwin**

Mailing Address 90 S Swan St  
Ste 400

City Albany State NY Zip Code 12210-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

09 / 12 / 2014

Transaction ID : 20140912125922-1

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kristina Baldwin**

Mailing Address 90 S Swan St  
Ste 400

City Albany State NY Zip Code 12210-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

09 / 26 / 2014

Transaction ID : 20140926182311-1

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Paul C. Blume**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, State Governmen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1312.00

Date of Receipt

09 / 12 / 2014

Transaction ID : 20140912125922-3

Amount of Each Receipt this Period

82.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

182.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Paul C. Blume**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, State Governmen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1312.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-3**

Amount of Each Receipt this Period

82.00

Full Name (Last, First, Middle Initial)

**B. William Briggs**

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Political Engagement - State

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-4**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. William Briggs**

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Political Engagement - State

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-4**

Amount of Each Receipt this Period

25.00

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

132.00

**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: PAGE 8 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. D. Kenton Brine**

Mailing Address 1500 Water St SW  
Apt 2

City Olympia State WA Zip Code 98501-2295

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, State Govern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. D. Kenton Brine**

Mailing Address 1500 Water St SW  
Apt 2

City Olympia State WA Zip Code 98501-2295

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, State Govern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Stephen Broadie**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Financial Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-6

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Stephen Broadie**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Financial Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-6**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. G. Donovan Brown**

Mailing Address 3602 Donegal Dr

City State Zip Code  
Tallahassee FL 32309-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Counsel, State Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-7**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. G. Donovan Brown**

Mailing Address 3602 Donegal Dr

City State Zip Code  
Tallahassee FL 32309-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Counsel, State Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-7**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.00

**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: PAGE 10 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Jerry W. Brumfield**

Mailing Address 2300 NW Ashurst Dr

City

Lees Summit

State

MO

Zip Code

64081-2029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Spec-ASEC, Assoc Gen Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2014

**Transaction ID : 20140905121359-3**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Jerry W. Brumfield**Mailing Address 700 W 47th St  
Ste 350

City

Kansas City

State

MO

Zip Code

64112-1805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Spec-ASEC, Assoc Gen Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 19 / 2014

**Transaction ID : 20140923191438-3**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Leon Buck**Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, Federal Gove

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : 20140912125922-8**

Amount of Each Receipt this Period

25.00

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

65.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Leon Buck**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, Federal Gove

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-8**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Pamela A. Burgess**

Mailing Address 2604 Eton Cross Rd

City Royal Oak State MI Zip Code 48073-3723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President Strategic Process Desig

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-3**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Pamela A. Burgess**

Mailing Address 2604 Eton Cross Rd

City Royal Oak State MI Zip Code 48073-3723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President Strategic Process Desig

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-3**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Diane Burkert**

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 25 / 2014

**Transaction ID : F800D202AF3B4FB1A2ED**

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**B. Danielle Cagan**

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : F2D3C62331B54D3FB0D2**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**c. Kelly Campbell**

Mailing Address 1535 Grant St  
Ste 304

City

Denver

State

CO

Zip Code

80203-1843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-9**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

790.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Kelly Campbell**

Mailing Address 1535 Grant St  
Ste 304

City State Zip Code  
Denver CO 80203-1843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-9**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. David J. Cercone**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Executive Vice President & General Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-10**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. David J. Cercone**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Executive Vice President & General Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-10**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Rebecca S. Chapa**

Mailing Address 5221 N O Connor Blvd  
Ste 400

City Irving State TX Zip Code 75039-3711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Senior Marketing Underwriter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-4**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Rebecca S. Chapa**

Mailing Address 5221 N O Connor Blvd  
Ste 400

City Irving State TX Zip Code 75039-3711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Senior Marketing Underwriter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-4**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Mark Chenetski**

Mailing Address 5734 Ennishannon Pl

City Dublin State OH Zip Code 43016-6008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-5**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Mark Chenetski**

Mailing Address 5734 Ennishannon Pl

City State Zip Code  
Dublin OH 43016-6008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-5**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Gerald K. Chiddick**

Mailing Address 26777 Halsted Rd

City State Zip Code  
Farmington Hills MI 48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amerisure Companies

Occupation  
Vice President of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-5**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Gerald K. Chiddick**

Mailing Address 26777 Halsted Rd

City State Zip Code  
Farmington Hills MI 48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amerisure Companies

Occupation  
Vice President of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-5**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

**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: PAGE 16 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Randi Cigelnik**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Corporate Secre

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-11

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Randi Cigelnik**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Corporate Secre

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-11

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Barbara Clark**

Mailing Address 3055 Oak Rd

City State Zip Code  
Walnut Creek CA 94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Assistant Vice President of Claims, Op

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 6F2AD3BADA23FC7F718

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

340.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Kevin M. Clement**

Mailing Address 2139 Cliffside Dr

City

Wixom

State

MI

Zip Code

48393-1277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Director O Enterprise Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-7**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kevin M. Clement**

Mailing Address 2139 Cliffside Dr

City

Wixom

State

MI

Zip Code

48393-1277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Director O Enterprise Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-7**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Barbara J. Cristea**

Mailing Address 7879 Rutherford Ct

City

Canton

State

MI

Zip Code

48187-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-9**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

125.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Barbara J. Cristea**

Mailing Address 7879 Rutherford Ct

City

State

Zip Code

Canton

MI

48187-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Amerisure Companies

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-9**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Michael Day**

Mailing Address 3055 Oak Rd

City

State

Zip Code

Walnut Creek

CA

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CSAA Insurance Group

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 25 / 2014

**Transaction ID : 1DA9409C10654740AAC9**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Ann P. DeBellis**

Mailing Address 301 Sullivan Way

City

State

Zip Code

Ewing

NJ

08628-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NJM Insurance Group

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 22 / 2014

**Transaction ID : B007E82C1F2D6818F30**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

675.00

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

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

FOR LINE NUMBER: PAGE 19 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Jean Demas**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, Publishing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-12

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Jean Demas**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, Publishing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-12

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Carol J. Denzer**

Mailing Address 9025 N Lindbergh Dr

City State Zip Code  
Peoria IL 61615-1499

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RLI

Occupation

Vice President and Chief Information O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 6565C3D60CF901BF18C

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)..... ►

280.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Michael M. Dieterle**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President, Field Marketing & Unde

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2014

**Transaction ID : 20140909153635-11**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Michael M. Dieterle**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President, Field Marketing & Unde

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : 20140923171044-11**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Billy Donaldson**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 02 / 2014

**Transaction ID : 20140902161403-1**

Amount of Each Receipt this Period

28.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

128.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Billy Donaldson**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

09 / 17 / 2014

**Transaction ID : 20140917144904-1**

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**B. Vincent T. Donnelly**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 08 / 2014

**Transaction ID : 20140908153945-3**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Vincent T. Donnelly**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152849-3**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

128.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Vincent T. Donnelly**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152925-3**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Bridget Driggs**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Political Engagement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.10

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-13**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Bridget Driggs**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Political Engagement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.10

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-13**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

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

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

FOR LINE NUMBER: PAGE 23 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Dwaune DuPree**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Counsel, Financial Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-15

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Dwaune DuPree**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Counsel, Financial Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-15

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Juliet Marie Edens**

Mailing Address 1440 State Highway 248

City Branson State MO Zip Code 65616-9655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American National Property and Casualty

Occupation  
Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171132-2

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

90.00

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

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

FOR LINE NUMBER: PAGE 24 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Gerardo Espinoza**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2014

**Transaction ID : 20140909153635-12**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Glenn E. Farley**

Mailing Address 600 Lansdowne Dr

City

Westland

State

MI

Zip Code

48185-3493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - WC Claims,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2014

**Transaction ID : 20140909153635-13**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Glenn E. Farley**

Mailing Address 600 Lansdowne Dr

City

Westland

State

MI

Zip Code

48185-3493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - WC Claims,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2014

**Transaction ID : 20140923171044-13**

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Armand Feliciano**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Vice President, ACIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : 20140912125922-17**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Armand Feliciano**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Vice President, ACIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

**Transaction ID : 20140926182311-17**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. William Ferro**

Mailing Address 14363 Pernell Dr

City State Zip Code  
Sterling Heights MI 48313-5454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amerisure Companies

Occupation  
Supervising Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2014

**Transaction ID : 20140909153635-14**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. William Ferro**

Mailing Address 14363 Pernel Dr

City

Sterling Heights

State

MI

Zip Code

48313-5454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Supervising Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-14**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Kenneth L. Fields**

Mailing Address 4088 Pathfield Dr

City

Columbus

State

OH

Zip Code

43230-6342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Sales Development Directr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-8**

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

**C. Kenneth L. Fields**

Mailing Address 4088 Pathfield Dr

City

Columbus

State

OH

Zip Code

43230-6342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Sales Development Directr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-8**

Amount of Each Receipt this Period

27.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

69.00

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

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

FOR LINE NUMBER: PAGE 27 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. L. Michael Fitzgerald

Mailing Address 5981 Airport Rd

City

Oriskany

State

NY

Zip Code

13424-3905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Utica First Insurance Company

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014

Transaction ID : F97F88F88B256E538DE

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mark F. Fox

Mailing Address 29911 Robert Dr

City

Livonia

State

MI

Zip Code

48150-3045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President Special Risk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014

Transaction ID : 20140909153635-16

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mark F. Fox

Mailing Address 29911 Robert Dr

City

Livonia

State

MI

Zip Code

48150-3045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President Special Risk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171044-16

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

340.00

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: PAGE 28 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. Kurt D. Gallinger

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President &amp; Counsel - Government

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2014

Transaction ID : 20140909153635-18

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Kurt D. Gallinger

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President &amp; Counsel - Government

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171044-18

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Michael F. Gerik

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : 20140902161403-2

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

170.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Michael F. Gerik**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

09 / 17 / 2014

**Transaction ID : 20140917144904-2**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Bernard S. Gerwel**

Mailing Address American National Corp Centre 1949

City

Springfield

State

MO

Zip Code

65899-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American National Property and Casualt

Occupation

Vice President, MITS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 29 / 2014

**Transaction ID : 159BB7193DC3480CA834**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Trey Gillespie**

Mailing Address 1504 San Antonio St

City

Austin

State

TX

Zip Code

78701-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Workers Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-18**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

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

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

FOR LINE NUMBER: PAGE 30 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Trey Gillespie**

Mailing Address 1504 San Antonio St

City

Austin

State

TX

Zip Code

78701-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Workers Compensation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-18

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Robert Gordon**Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Policy Developm

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-20

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Robert Gordon**Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Policy Developm

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-20

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Daniel J. Graf**

Mailing Address 45000 Drocton Ct

City

State

Zip Code

Novi

MI

48375-3802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President, Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-20**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Daniel J. Graf**

Mailing Address 45000 Drocton Ct

City

State

Zip Code

Novi

MI

48375-3802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President, Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-20**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Kelly T. Graham**

Mailing Address 39114 Augusta Ave

City

State

Zip Code

Sterling Heights

MI

48313-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - Premium Aud

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-21**

Amount of Each Receipt this Period

13.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

63.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Kelly T. Graham**

Mailing Address 39114 Augusta Ave

City

Sterling Heights

State

MI

Zip Code

48313-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - Premium Aud

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-21**

Amount of Each Receipt this Period

13.00

Full Name (Last, First, Middle Initial)

**B. Ann Gray**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Federal Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-21**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ann Gray**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Director, Federal Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-21**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

63.00

**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: PAGE 33 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Donald Griffin**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Personal Lines

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-22**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Donald Griffin**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Personal Lines

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-22**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Gregg L. Hanson**

Mailing Address One Financial Center, 13th Floor,

City State Zip Code  
Boston MA 02111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coverys Companies

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 25 / 2014

**Transaction ID : F46A7471D88542E4A781**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

550.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Kirk B. Hinman**

Mailing Address 5981 Airport Rd

City

Oriskany

State

NY

Zip Code

13424-3905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Utica First Insurance Company

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 17 / 2014

**Transaction ID : 2D5B3BE3630CA39B204**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Yvonne Macks Hobson**

Mailing Address 8933 Minne Wana Rd

City

Clarkston

State

MI

Zip Code

48348-3318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Product Line Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-24**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Yvonne Macks Hobson**

Mailing Address 8933 Minne Wana Rd

City

Clarkston

State

MI

Zip Code

48348-3318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Product Line Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-24**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

340.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Thomas E. Hoeg**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

President and Chief Executive Officer,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-25**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Thomas E. Hoeg**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

President and Chief Executive Officer,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-25**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. June Holmes**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Chief Operating Officer and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2950.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-26**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

200.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. June Holmes

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Chief Operating Officer and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-26

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Jeffrey W. Huebner

Mailing Address 3055 Oak Rd

City State Zip Code  
Walnut Creek CA 94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Director, Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : F4E55C8376EA4DD59E3D

Amount of Each Receipt this Period

480.00

Full Name (Last, First, Middle Initial)

C. Micaela Isler

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, State Govern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-27

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)..... ►

695.00

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: PAGE 37 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Micaela Isler**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Assistant Vice President, State Govern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-27**

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

**B. Daniel H. Johnson**

Mailing Address 10715 David Taylor Dr  
Ste 500

City Charlotte State NC Zip Code 28262-2007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - CSC Manage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-28**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Daniel H. Johnson**

Mailing Address 10715 David Taylor Dr  
Ste 500

City Charlotte State NC Zip Code 28262-2007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Assistant Vice President - CSC Manage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-28**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

105.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Scott A. Joyner**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-29**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**B. Scott A. Joyner**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-29**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**C. Edward M. Kerner**

Mailing Address 301 Sullivan Way

City State Zip Code  
Ewing NJ 08628-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJM Insurance Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 08 / 2014

**Transaction ID : 67DF71DF522BB194697**

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

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

FOR LINE NUMBER: PAGE 39 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Roy D. Kinnan**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Chief Financial Officer & Treasurer, A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-30**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Roy D. Kinnan**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Chief Financial Officer & Treasurer, A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-30**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Keith D. Krueger**

Mailing Address 8500 Normandale Lake Blvd  
Ste 1400

City

Bloomington

State

MN

Zip Code

55437-3826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

VP/WC UW & Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-13**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Keith D. Krueger**

Mailing Address 8500 Normandale Lake Blvd  
Ste 1400

City State Zip Code  
Bloomington MN 55437-3826

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
VP/WC UW & Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-13**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Gerald F. Ladner**

Mailing Address 5918 W Courtyard Dr  
Ste 100

City State Zip Code  
Austin TX 78730-5036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-14**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Gerald F. Ladner**

Mailing Address 5918 W Courtyard Dr  
Ste 100

City State Zip Code  
Austin TX 78730-5036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-14**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Ed K. Lancaster**

Mailing Address 147 Bear Creek Pike

City

Columbia

State

TN

Zip Code

38401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Farmers Insurance Companies

Occupation

General Counsel and Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : B24361C386AA6697EC9**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Patrick I. Leeper**

Mailing Address 1134 W Ward Pkwy

City

Springfield

State

MO

Zip Code

65810-2581

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American National Property and Casualty

Occupation

AVP-Lic & Field Perf Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171132-4**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Alan R. Leist Jr.**

Mailing Address 5981 Airport Rd

City

Oriskany

State

NY

Zip Code

13424-3905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Utica First Insurance Company

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 6933A64AAA02BC768C5**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

575.00

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

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

FOR LINE NUMBER: PAGE 42 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Thomas Litjen**

Mailing Address **444 N Capitol St NW**  
**Ste 801**

City State Zip Code  
 Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Federal Government Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1875.06**

Date of Receipt

**09 / 12 / 2014**

**Transaction ID : 20140912125922-35**

Amount of Each Receipt this Period

**104.17**

Full Name (Last, First, Middle Initial)

**B. Thomas Litjen**

Mailing Address **444 N Capitol St NW**  
**Ste 801**

City State Zip Code  
 Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Federal Government Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1875.06**

Date of Receipt

**09 / 26 / 2014**

**Transaction ID : 20140926182311-35**

Amount of Each Receipt this Period

**104.17**

Full Name (Last, First, Middle Initial)

**C. Perry Liu**Mailing Address **3055 Oak Rd**

City State Zip Code  
 Walnut Creek CA 94597-2098

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

CSAA Insurance Group

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**480.00**

Date of Receipt

**09 / 25 / 2014**

**Transaction ID : 3EB6BA778E3C45399038**

Amount of Each Receipt this Period

**480.00**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**688.34**

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

**688.34**

# **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 43 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Nicole Mahrt**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-37**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Nicole Mahrt**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-37**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Deirdre Manna**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Political Engagement &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-38**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Deirdre Manna**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Political Engagement &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

MM / DD / YYYY  
09 / 26 / 2014

**Transaction ID : 20140926182311-38**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Timothy L. McCarthy**

Mailing Address PO Box 2690

City State Zip Code  
Waco TX 76702-2690

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Actuarial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : 20140902161403-3**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. Timothy L. McCarthy**

Mailing Address PO Box 2690

City State Zip Code  
Waco TX 76702-2690

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Actuarial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

MM / DD / YYYY  
09 / 17 / 2014

**Transaction ID : 20140917144904-3**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

130.00

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

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

FOR LINE NUMBER: PAGE 45 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. Karen M. Murphy

Mailing Address 14280 Park Meadow Dr  
Ste 300

City Chantilly State VA Zip Code 20151-2291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medmarc Insurance Group

Occupation

Senior Vice President, Business Develo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : 1F6142A4EFCC4967B9A6

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Robert J. Murray

Mailing Address 301 Sullivan Way

City Ewing State NJ Zip Code 08628-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJM Insurance Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2014

Transaction ID : 62FBA09F4DB05FEDD9E

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. Steven M. Nelson

Mailing Address 4830 Birch Hollow Dr

City Lincoln State NE Zip Code 68516-3382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FBL Financial Group

Occupation

Business Center Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171208-9

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

565.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 46 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Stephen Norton**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee.

C

Name of Employer

PCI

Occupation

Director, Executive Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-41**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Frank O'Brien**

Mailing Address 1 State St  
Ste 1500

City Boston State MA Zip Code 02109-3542

FEC ID number of contributing federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-43**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Frank O'Brien**

Mailing Address 1 State St  
Ste 1500

City Boston State MA Zip Code 02109-3542

FEC ID number of contributing federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-42**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Stephen J. O'Connor**

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 25 / 2014

**Transaction ID : 92E6EA5413C14E979639**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Joanne M. Orfanos**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Membership and

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-45**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Joanne M. Orfanos**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Membership and

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-44**

Amount of Each Receipt this Period

50.00

**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

FOR LINE NUMBER: PAGE 48 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. Leo M. Orth Jr.

Mailing Address 14614 Wilden Dr

City

Urbandale

State

IA

Zip Code

50323-2070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FBL Financial Group

Occupation

Vice President Research &amp; Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171208-10

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

B. Gregory V. Ostergren

Mailing Address 1949 E Sunshine St

City

Springfield

State

MO

Zip Code

65804-1616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American National Property and Casualt

Occupation

Chairman, President and Chief Executiv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171132-7

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. John M. Petrucci

Mailing Address 5961 Morganwood Sq

City

Hilliard

State

OH

Zip Code

43026-7176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

VP/Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2014

Transaction ID : 20140905121359-19

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)..... ►

392.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. John M. Petrucci**

Mailing Address 5961 Morganwood Sq

City  
Hilliard

State  
OH

Zip Code  
43026-7176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

VP/Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-19**

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

**B. Daniel D. Pitcher**

Mailing Address 2508 Country Side Pl

City

West Des Moines

State

IA

Zip Code

50265-7641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FBL Financial Group

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171208-11**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey Politte**

Mailing Address 305 Timber Ests

City

Algona

State

IA

Zip Code

50511-7290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-20**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

147.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Politte**

Mailing Address 305 Timber Ests

City

Algona

State

IA

Zip Code

50511-7290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-20**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Cynthia A. Powell**

Mailing Address 2204 Stratingham Dr

City

Dublin

State

OH

Zip Code

43016-8908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

SVP/Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-21**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Cynthia A. Powell**

Mailing Address 2204 Stratingham Dr

City

Dublin

State

OH

Zip Code

43016-8908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

SVP/Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-21**

Amount of Each Receipt this Period

25.00

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

70.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Richard W. Ramell**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Branch Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 08 / 2014

**Transaction ID : 20140908153945-8**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Richard W. Ramell**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Branch Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152849-8**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Richard W. Ramell**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Branch Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152925-8**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

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)

PAGE 52 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Michael Randall**

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Senior Vice President Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 25 / 2014

**Transaction ID : D914A64D80B44A2F8951**

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**B. Lyle Rhodebeck**

Mailing Address 6185 Baneberry Dr

City

Westerville

State

OH

Zip Code

43082-8879

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

SVP/Director of Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-22**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Lyle Rhodebeck**

Mailing Address 6185 Baneberry Dr

City

Westerville

State

OH

Zip Code

43082-8879

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

SVP/Director of Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-22**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

270.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Paul E. Richards**

Mailing Address 21450 Gorthe Street

City

Grosse Ponte Woods

State

MI

Zip Code

48238-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-44**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Paul E. Richards**

Mailing Address 21450 Gorthe Street

City

Grosse Ponte Woods

State

MI

Zip Code

48238-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-44**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. James Richardson**

Mailing Address 2726 Lovett Ln

City

Cedar Park

State

TX

Zip Code

78613-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

RVP-Business Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-23**

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. James Richardson**

Mailing Address 2726 Lovett Ln

City

Cedar Park

State

TX

Zip Code

78613-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

RVP-Business Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-23**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Douglas R. Roggenbaum**

Mailing Address 3955 Pitt Rd

City

Waterford

State

MI

Zip Code

48328-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-46**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**c. Douglas R. Roggenbaum**

Mailing Address 3955 Pitt Rd

City

Waterford

State

MI

Zip Code

48328-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-46**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

95.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Mark J. Roso**

Mailing Address 1171 Park Dr

City State Zip Code  
 Gahanna OH 43230-6292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 State Auto Insurance Companies

Occupation  
 AVP/Business Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-24**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mark J. Roso**

Mailing Address 1171 Park Dr

City State Zip Code  
 Gahanna OH 43230-6292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 State Auto Insurance Companies

Occupation  
 AVP/Business Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-24**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. David Sampson**

Mailing Address 444 N Capitol St NW  
 Ste 801

City State Zip Code  
 Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Property Casualty Insurers Association

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3745.42

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-48**

Amount of Each Receipt this Period

208.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

248.08

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. David Sampson**

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3745.42

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-47**

Amount of Each Receipt this Period

208.08

Full Name (Last, First, Middle Initial)

## **B. John Santulli**

Mailing Address 380 Sentry Pkwy

City Blue Bell State PA Zip Code 19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Exec Vice President Risk Services and

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 08 / 2014

**Transaction ID : 20140908153945-9**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. John Santulli**

Mailing Address 380 Sentry Pkwy

City Blue Bell State PA Zip Code 19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Exec Vice President Risk Services and

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152925-9**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

248.08

**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 57 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. John Santulli**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Exec Vice President Risk Services and

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152849-9**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Donald Schneider**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Director of Finance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

680.00

Date of Receipt

09 / 02 / 2014

**Transaction ID : 20140902161403-4**

Amount of Each Receipt this Period

42.50

Full Name (Last, First, Middle Initial)

**c. Dorothy H. Schreck**

Mailing Address 382 Pheasant Run

City

Wadsworth

State

OH

Zip Code

44281-2377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

RVP-Business Insurance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-26**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.50

**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 58 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. Dorothy H. Schreck

Mailing Address 382 Pheasant Run

City

Wadsworth

State

OH

Zip Code

44281-2377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

RVP-Business Insurance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 19 / 2014

Transaction ID : 20140923191438-26

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Kurt Schuhl

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Sr Vice President &amp; Chief Claims Offic

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 08 / 2014

Transaction ID : 20140908153945-10

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Kurt Schuhl

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Sr Vice President &amp; Chief Claims Offic

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 26 / 2014

Transaction ID : 20140926152849-10

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

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: PAGE 59 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Kurt Schuhl**

Mailing Address 380 Sentry Pkwy

City

Blue Bell

State

PA

Zip Code

19422-2357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMA Insurance Group

Occupation

Sr Vice President & Chief Claims Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926152925-10**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Matthew M. Scoggins Jr.**

Mailing Address 147 Bear Creek Pike

City

Columbia

State

TN

Zip Code

38401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Farmers Insurance Companies

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 5AAE3BEB6A6452421186**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Donald J. Seibel**

Mailing Address 5400 University Ave

City

West Des Moines

State

IA

Zip Code

50266-5950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FBL Financial Group

Occupation

Chief Financial Officer and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171208-16**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

315.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Mark Sektnan**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : 20140912125922-49**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mark Sektnan**

Mailing Address 1415 L St  
Ste 670

City State Zip Code  
Sacramento CA 95814-3964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

**Transaction ID : 20140926182311-48**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia M. Sheveland**

Mailing Address 491 Thomas Ave

City State Zip Code  
Shakopee MN 55379-2469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Dir-Claims Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2014

**Transaction ID : 20140905121359-27**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

130.00

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

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

FOR LINE NUMBER: PAGE 61 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Patricia M. Sheveland**

Mailing Address 491 Thomas Ave

City

Shakopee

State

MN

Zip Code

55379-2469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Auto Insurance Companies

Occupation

Dir-Claims Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-27**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Colleen Shiel**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-51**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Colleen Shiel**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-50**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Matthew J. Simon**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President & Chief Financial Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-49**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Matthew J. Simon**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President & Chief Financial Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-49**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**c. Shannon L. Smith**

Mailing Address American National Corp Centre 1949  
4-430

City

Springfield

State

MO

Zip Code

65899-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American National Property and Casualt

Occupation

EVP-Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171132-10**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Oyango Snell**

Mailing Address **444 N Capitol St NW**  
**Ste 801**

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Property Casualty Insurers Association

Occupation

Counsel, State Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1150.00**

Date of Receipt

**09 / 12 / 2014**

**Transaction ID : 20140912125922-52**

Amount of Each Receipt this Period

**50.00**

Full Name (Last, First, Middle Initial)

**B. Oyango Snell**

Mailing Address **444 N Capitol St NW**  
**Ste 801**

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Property Casualty Insurers Association

Occupation

Counsel, State Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1150.00**

Date of Receipt

**09 / 26 / 2014**

**Transaction ID : 20140926182311-51**

Amount of Each Receipt this Period

**50.00**

Full Name (Last, First, Middle Initial)

**c. David Snyder**

Mailing Address **444 N Capitol St NW**  
**Ste 801**

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

PCI

Occupation

Vice President, International Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**900.00**

Date of Receipt

**09 / 12 / 2014**

**Transaction ID : 20140912125922-53**

Amount of Each Receipt this Period

**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**150.00**

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

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

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

FOR LINE NUMBER: PAGE 64 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. David Snyder**

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PCI

Occupation

Vice President, International Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

**Transaction ID : 20140926182311-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Stephen Solimine**

Mailing Address 3624 Wolcott Dr

City State Zip Code  
Flower Mound TX 75028-8712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President - Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2014

**Transaction ID : 20140909153635-50**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Stephen Solimine**

Mailing Address 3624 Wolcott Dr

City State Zip Code  
Flower Mound TX 75028-8712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President - Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : 20140923171044-50**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

80.00



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

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

FOR LINE NUMBER: PAGE 65 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Jon D. Srna**

Mailing Address 8600 Westmoreland Rd

City

Westmoreland

State

KS

Zip Code

66549-9578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FBL Financial Group

Occupation

Business Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : 20140923171208-19

Amount of Each Receipt this Period

29.17

Full Name (Last, First, Middle Initial)

**B. Scott St. Angel**Mailing Address 23 Royal Rd  
Ste 100

City

Flemington

State

NJ

Zip Code

08822-1621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Farmers Insurance Company of Flemington

Occupation

President &amp; Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 2BE97232-9B6F-443C-

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**C. Dennis R. Stephen**

Mailing Address 147 Bear Creek Pike

City

Columbia

State

TN

Zip Code

38401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Farmers Insurance Companies

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014

Transaction ID : AE608E5A7D43479F7C6

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

519.17

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. John A. Stephens**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Insurance Companies

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 02 / 2014

**Transaction ID : 20140902161403-5**

Amount of Each Receipt this Period

31.25

Full Name (Last, First, Middle Initial)

**B. Tim Strickler**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Manager, Political Engagement - Federa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-54**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Tim Strickler**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Manager, Political Engagement - Federa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-53**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

51.25

**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 67 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Mark Sullivan**

Mailing Address 518 E Broad St

City State Zip Code  
Columbus OH 43215-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Human Resources Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

09 / 05 / 2014

**Transaction ID : 20140905121359-29**

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**B. Mark Sullivan**

Mailing Address 518 E Broad St

City State Zip Code  
Columbus OH 43215-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Auto Insurance Companies

Occupation  
Human Resources Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

09 / 19 / 2014

**Transaction ID : 20140923191438-29**

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**c. Debra Szmagaj**

Mailing Address 1267 Old Milford Farms

City State Zip Code  
Milford MI 48381-3373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amerisure Companies

Occupation  
Vice President Business Application Se

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-55**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 68 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Debra Szmagaj**

Mailing Address 1267 Old Milford Farms

City  
Milford

State  
MI

Zip Code  
48381-3373

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President Business Application Se

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-55**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Courtney Thomas**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City  
Chicago

State  
IL

Zip Code  
60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Meetings Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-56**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Courtney Thomas**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City  
Chicago

State  
IL

Zip Code  
60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Director, Meetings Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-55**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Lori Tobis**

Mailing Address 450 S Vernon St

City

State

Zip Code

Dearborn

MI

48124-1393

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Amerisure Companies

Supervising Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-57**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Lori Tobis**

Mailing Address 450 S Vernon St

City

State

Zip Code

Dearborn

MI

48124-1393

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Amerisure Companies

Supervising Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-57**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Marguerite Tortorello**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

State

Zip Code

Chicago

IL

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Property Casualty Insurers Association

Senior Vice President, Public Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-57**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

**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: PAGE 70 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Marguerite Tortorello**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-56

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. Neal Townsend**

Mailing Address 147 Bear Creek Pike

City State Zip Code  
Columbia TN 38401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Farmers Insurance Companies

Occupation

Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2014

Transaction ID : BB348EABD139B296AC1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Robert E. Valliere**

Mailing Address 3055 Oak Rd

City State Zip Code  
Walnut Creek CA 94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Vice President - Insurance Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : EE6A28740E59469793DB

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 71 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. John Vallor**

Mailing Address 3055 Oak Rd

City

Walnut Creek

State

CA

Zip Code

94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSAA Insurance Group

Occupation

Vice President of Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 303B0A6F3D7F01C18D8**

Amount of Each Receipt this Period

480.00

Full Name (Last, First, Middle Initial)

**B. Edward H. Wagner**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President of Corporate Underwrit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : 20140909153635-58**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Edward H. Wagner**

Mailing Address 26777 Halsted Rd

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerisure Companies

Occupation

Vice President of Corporate Underwrit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 20140923171044-58**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

540.00

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

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

FOR LINE NUMBER: PAGE 72 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Timothy A. Walsh**

Mailing Address 344 Route 9W

City

Glenmont

State

NY

Zip Code

12077-2910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Farm Family Casualty Insurance Company

Occupation

President, Chief Executive Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2014

Transaction ID : 20140908154442-1

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Timothy A. Walsh**

Mailing Address 344 Route 9W

City

Glenmont

State

NY

Zip Code

12077-2910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Farm Family Casualty Insurance Company

Occupation

President, Chief Executive Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014

Transaction ID : 20140918150306-1

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Deborah Wensel**Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City

Chicago

State

IL

Zip Code

60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Chief Financial

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-58

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

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



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

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

FOR LINE NUMBER: PAGE 73 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Deborah Wensel**

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City State Zip Code  
Chicago IL 60631-3512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Chief Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-57

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Nathaniel Wienecke**

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Federal Governm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

Transaction ID : 20140912125922-59

Amount of Each Receipt this Period

167.00

Full Name (Last, First, Middle Initial)

**C. Nathaniel Wienecke**

Mailing Address 444 N Capitol St NW  
Ste 801

City State Zip Code  
Washington DC 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Senior Vice President, Federal Governm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-58

Amount of Each Receipt this Period

167.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

434.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 74 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Jack C. Williams Jr.**

Mailing Address 6311 Ridgewood Rd

City

Jackson

State

MS

Zip Code

39211-2035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mississippi Farm Bureau Casualty Insur

Occupation

President - Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 18 / 2014

Transaction ID : C9A299CC14646970B16

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Steve E. Williams**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

09 / 02 / 2014

Transaction ID : 20140902161403-6

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**C. Steve E. Williams**

Mailing Address 7420 Fish Pond Rd

City

Waco

State

TX

Zip Code

76710-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Farm Bureau Group

Occupation

Vice President Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

09 / 17 / 2014

Transaction ID : 20140917144904-4

Amount of Each Receipt this Period

28.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

406.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 OF 111

☒ 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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Joe Woods**

Mailing Address 1504 San Antonio St

City

Austin

State

TX

Zip Code

78701-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-60**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joe Woods**

Mailing Address 1504 San Antonio St

City

Austin

State

TX

Zip Code

78701-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, State Government Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : 20140926182311-59**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Robert Woody**

Mailing Address 444 N Capitol St NW  
Ste 801

City

Washington

State

DC

Zip Code

20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Property Casualty Insurers Association

Occupation

Vice President, Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

**Transaction ID : 20140912125922-61**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

125.00

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

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

FOR LINE NUMBER: PAGE 76 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

A. Robert Woody

Mailing Address 444 N Capitol St NW  
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Casualty Insurers Association

Occupation  
Vice President, Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 20140926182311-60

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. John Xu

Mailing Address 3055 Oak Rd

City Walnut Creek State CA Zip Code 94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSAA Insurance Group

Occupation  
Actuarial Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : D3D2BE5668174C24A67A

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Michael Zukerman

Mailing Address 3055 Oak Rd  
W290

City Walnut Creek State CA Zip Code 94597-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSAA Insurance Group

Occupation  
Chief Legal Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2014

Transaction ID : 07B7FEECB6C240999707

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

1225.00

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

17042.42

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

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

FOR LINE NUMBER: PAGE 77 OF 111  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

## **A. Property Casualty Insurers Association of America**

Mailing Address 8700 West Bryn Mawr Ave

City State Zip Code  
 Chicago IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5366.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 30 2014

**Transaction ID : 500C93CCF57C413591DC**

Amount of Each Receipt this Period

200.31

Offset to Operating Exp September 2014

Full Name (Last, First, Middle Initial)

## **B.**

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

Full Name (Last, First, Middle Initial)

## **C.**

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

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

200.31

200.31

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

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

FOR LINE NUMBER: PAGE 78 OF 111

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Cantor for Congress**

Mailing Address PO Box 17813

City  
RichmondState  
VAZip Code  
23226-7813FEC ID number of contributing  
federal political committee.

C C00355461

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	4

Transaction ID : E1EB6D063DBBBF6810A

Amount of Each Receipt this Period

2125.00

Refund of 2014 General

Full Name (Last, First, Middle Initial)

**B.**

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

Full Name (Last, First, Middle Initial)

**C.**

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)..... ►

2125.00

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

2125.00

<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

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

### A. Bank of America

001

Category/  
Type

State:  District:

20.70

### B. Bank of America

001

Category/  
Type

State:  District:

12.23

### C. Bank of America

001

Category/  
Type

State:  District:

6.85

39.78

\_\_\_\_\_





<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

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

### A. Bank of America

001

Category/  
Type

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

11.23

**B.**

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**C.**

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Age Group	Percentage
18-24	11.23
25-34	11.23
35-44	11.23
45-54	11.23
55-64	11.23
65-74	11.23
75-84	11.23
85+	11.23

Age Group	Percentage
18-24	~10%
25-34	~200.31%
35-44	~15%
45-54	~10%
55-64	~10%
65-74	~10%
75-84	~10%
85+	~10%

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Al Green for Congress**

Mailing Address Post Office Box 20174

City	State	Zip Code
Houston	TX	77225

Purpose of Disbursement  
2014 General

011

Candidate Name

**Alexander N. Green**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

**Transaction ID : D48223AAE5795AFF4AE**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. America Works PAC**

Mailing Address PO Box 15293

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**America Works PAC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

**Transaction ID : 8524262660CEC7925AB**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**C. Bennet for Colorado**

Mailing Address PO Box 3078

City	State	Zip Code
Denver	CO	80201

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Michael F. Bennet**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

**Transaction ID : 79C0F44B8B07DE83BB5**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bennet for Colorado**

Mailing Address PO Box 3078

City Denver	State CO	Zip Code 80201
----------------	-------------	-------------------

Purpose of Disbursement  
2016 General

011

Candidate Name

**Michael F. Bennet**Category/  
Type
 Office Sought: ☐ House  
☒ Senate  
☐ President

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

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : 200B6ADA5D4335B8E70**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bennet for Colorado**

Mailing Address PO Box 3078

City Denver	State CO	Zip Code 80201
----------------	-------------	-------------------

Purpose of Disbursement  
2016 General

011

Candidate Name

**Michael F. Bennet**Category/  
Type
 Office Sought: ☐ House  
☒ Senate  
☐ President

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

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : AB2B5EA09BFC4D8E7CD**

Amount of Each Disbursement this Period

-2000.00
----------

Full Name (Last, First, Middle Initial)

**C. Bennet for Colorado**

Mailing Address PO Box 3078

City Denver	State CO	Zip Code 80201
----------------	-------------	-------------------

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Michael F. Bennet**Category/  
Type
 Office Sought: ☐ House  
☒ Senate  
☐ President

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

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : 619CF27EEB02653DBD6**

Amount of Each Disbursement this Period

-2500.00
----------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-2500.00
----------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bill Foster for Congress**

Mailing Address PO Box 9104

City Aurora	State IL	Zip Code 60598
----------------	-------------	-------------------

Purpose of Disbursement  
2014 General

Candidate Name

**Bill Foster**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : FAE05266F79A11FCA3D**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Cathy McMorris Rodgers for Congress**

Mailing Address Box 137

City Spokane	State WA	Zip Code 99210-0137
-----------------	-------------	------------------------

Purpose of Disbursement  
2014 General

Candidate Name

**Cathy McMorris Rodgers**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : 0F8C7F426215FADD190**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Common Sense Colorado**

Mailing Address PO Box 1978

City Denver	State CO	Zip Code 80201
----------------	-------------	-------------------

Purpose of Disbursement  
2014 Contribution

Candidate Name

**Common Sense Colorado**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : 75ACC7775D201D04D88**

Amount of Each Disbursement this Period

4500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Country Roads PAC**

Mailing Address PO Box 1387

City	State	Zip Code
Charleston	WV	25325

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Country Roads PAC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : EC287D759B5C1C1E438**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. David Scott for Congress**

Mailing Address PO Box 960821

City	State	Zip Code
Riverdale	GA	30296

Purpose of Disbursement  
2014 General

011

Candidate Name

**David Albert Scott**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : 45650600B26D9E28789**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Democratic Senatorial Campaign Committee**

Mailing Address 120 Maryland Ave NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Democratic Senatorial Campaign Committee**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

**Transaction ID : 3091BBD0F0D6AD67E58**

Amount of Each Disbursement this Period

-5000.00
----------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-2500.00
----------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Democratic Senatorial Campaign Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 120 Maryland Ave NE

**Transaction ID : D382ABCCA15FE30D75F**

City	State	Zip Code
Washington	DC	20002

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
2014 Contribution

011

Category/  
Type

Candidate Name

**Democratic Senatorial Campaign Committee**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: District: Contribution

Full Name (Last, First, Middle Initial)

**B. Devin Nunes Campaign Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address PO Box 6545

**Transaction ID : DB64461069F776653EA**

City	State	Zip Code
Visalia	CA	93290-6545

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Devin G. Nunes**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 22

Full Name (Last, First, Middle Initial)

**C. Diane Black for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address PO Box 1437

**Transaction ID : 7F9E9F2528395CD82F5**

City	State	Zip Code
Gallatin	TN	37066-1437

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Diane Black**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TN District: 06

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Forward Together PAC**

Mailing Address 1751 Potomac Greens Drive

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Forward Together PAC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2014

**Transaction ID : A476FC241B885CFC9CD**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of John Delaney**

Mailing Address PO Box 70835

City	State	Zip Code
Bethesda	MD	20813

Purpose of Disbursement  
2014 General

011

Candidate Name

**John K. Delaney**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2014

**Transaction ID : 4508EAA3BA6E63AC127**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Mia Love**

Mailing Address PO Box 255

City	State	Zip Code
Riverton	UT	84065

Purpose of Disbursement  
2014 General

011

Candidate Name

**Mia Love**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2014

**Transaction ID : 62B71CA75DFA858B1E0**

Amount of Each Disbursement this Period

1500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Gillibrand for Senate**Mailing Address 236 Massachusetts Ave NE  
Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2018 Primary

Candidate Name

**Kirsten Elizabeth Gillibrand**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : BE8400AD3B3E84593FF**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. John Carney for Congress**

Mailing Address PO Box 2162

City Wilmington State DE Zip Code 19899

Purpose of Disbursement  
2014 General

Candidate Name

**John Charles Carney Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: DE District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : AB15276D1846C2DFE58**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285

Purpose of Disbursement  
2014 General

Candidate Name

**Kyrsten Sinema**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : 89019A70DD5EF5E0AB8**

Amount of Each Disbursement this Period

1500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
---------

--



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Lee, Sheila Jackson**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Mailing Address 4412 Alameda Road

**Transaction ID : CEA36C7906CF427F6BF**

City	State	Zip Code
Houston	TX	77004

Amount of Each Disbursement this Period

Purpose of Disbursement  
2014 General

011

1000.00
---------

Candidate Name

**Sheila Jackson Lee**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 18

Full Name (Last, First, Middle Initial)

**B. Lucas for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address PO Box 1726

**Transaction ID : 087C408D845BBB18991**

City	State	Zip Code
Oklahoma City	OK	73101-1726

Amount of Each Disbursement this Period

Purpose of Disbursement  
2014 General

011

1000.00
---------

Candidate Name

**Frank D. Lucas**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OK District: 03

Full Name (Last, First, Middle Initial)

**C. Lynn Jenkins for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address PO Box 1441

**Transaction ID : 72567293AF15F54ADFC**

City	State	Zip Code
Topeka	KS	66601-1441

Amount of Each Disbursement this Period

Purpose of Disbursement  
2014 General

011

2500.00
---------

Candidate Name

**Lynn Jenkins**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KS District: 02

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Majority Committee PAC--Mc PAC**

Mailing Address PO Box 10134

City	State	Zip Code
Bakersfield	CA	93389

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Majority Committee PAC--Mc PAC**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : 1D6FCE884BCB4EB5F12**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. McHenry for Congress**

Mailing Address PO Box 1406

City	State	Zip Code
Hickory	NC	28603-1406

Purpose of Disbursement  
2014 General

011

Candidate Name

**Patrick Timothy McHenry**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

**Transaction ID : BC7BF3B56AE53B9AF2A**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Miller-Meeks for Congress**

Mailing Address PO Box 1570

City	State	Zip Code
Ottumwa	IA	52501

Purpose of Disbursement  
2014 General

011

Candidate Name

**Mariannette Jane Miller-Meeks**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : F49A44375C50CA2C6A8**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Montanans for Tester**

Mailing Address PO Box 1135

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Jon Tester**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MT

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : E2582124CB68E97607E**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. People Helping People**

Mailing Address 555 South Flower Street, #4210

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**People Helping People**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 13C8F7DE5097C93AB6E**

Amount of Each Disbursement this Period

-1000.00
----------

Full Name (Last, First, Middle Initial)

**C. People Helping People**

Mailing Address 555 South Flower Street, #4210

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**People Helping People**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 3BA5CDA51F4D66DC7A4**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Renee Ellmers for Congress Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address PO Box 99567

City	State	Zip Code
Raleigh	NC	27624

**Transaction ID : 4F1A9CFA40E40E4A8C7**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name

**Renee Jacisin Ellmers**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 02

Full Name (Last, First, Middle Initial)

**B. Robert Hurt for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address PO Box 8

City	State	Zip Code
Chatham	VA	24531-0008

**Transaction ID : 7B6D3FDE099D2180EA9**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name

**Robert Hurt**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 05

Full Name (Last, First, Middle Initial)

**C. Ruben Hinojosa for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Mailing Address 10125 N. 10th Street, Suite E

City	State	Zip Code
McAllen	TX	78504

**Transaction ID : 2E322B6FFAC9D54EDE0**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

1500.00
---------

Candidate Name

**Ruben E. Hinojosa**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 15

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

6500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Ryan for Congress, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

Mailing Address PO Box 1488

City	State	Zip Code
Janesville	WI	53547-1488

**Transaction ID : 69E474F1E48B7924430**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

Candidate Name

**Paul Ryan**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 01

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Scott Garrett for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

Mailing Address PO Box 905

City	State	Zip Code
Newton	NJ	07860

**Transaction ID : 526481A9BCC0E25598D**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

Candidate Name

**Scott Garrett**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

-2500.00
----------

Full Name (Last, First, Middle Initial)

**C. Scott Garrett for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

Mailing Address PO Box 905

City	State	Zip Code
Newton	NJ	07860

**Transaction ID : A08B58B3FF858C1226F**Purpose of Disbursement  
2014 General

011

Amount of Each Disbursement this Period

Candidate Name

**Scott Garrett**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Stabenow for US Senate**

Mailing Address PO Box 4945

City	State	Zip Code
East Lansing	MI	48826

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Deborah Stabenow**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : 8740273BEF4FDC6E618**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Team Graham Inc**

Mailing Address PO Box 1801

City	State	Zip Code
Columbia	SC	29202

Purpose of Disbursement  
2014 General

011

Candidate Name

**Lindsey O. Graham**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : B19F125B79CC880C1AD**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Terri Sewell for Congress**

Mailing Address PO Box 1964

City	State	Zip Code
Birmingham	AL	35201

Purpose of Disbursement  
2014 General

011

Candidate Name

**Terri A. Sewell**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

**Transaction ID : 75E68361F253CC24E9A**

Amount of Each Disbursement this Period

1000.00
---------

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

4000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 111

<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

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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Tim Scott for Senate**

Mailing Address 1405 Ashley River Road

City	State	Zip Code
Charleston	SC	29407

Purpose of Disbursement  
2014 General

011

Candidate Name

**Timothy Eugene Scott**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

**Transaction ID : 49FF5A29DCB6DA46382**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Tisei Congressional Committee**

Mailing Address 26 Main Street

City	State	Zip Code
Lynnfield	MA	01940

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Richard R. Tisei**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

**Transaction ID : 3805F51E3231385E685**

Amount of Each Disbursement this Period

-1000.00
----------

Full Name (Last, First, Middle Initial)

**C. Trust PAC Team Republicans for Utilizing Sensible Tactics**Mailing Address 228 S. Washington Street  
Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Trust PAC Team Republicans for Utilizing Sensible Tactics**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

**Transaction ID : C643937923D15B8B91D**

Amount of Each Disbursement this Period

1500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00
---------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 111

<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

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)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Womack for Congress Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2014

Mailing Address PO Box 508

Transaction ID : FE6A95008535013A092

City	State	Zip Code
Rogers	AR	72757-0508

Amount of Each Disbursement this Period

Purpose of Disbursement  
2014 General

011
Category/ Type

1000.00
---------

Candidate Name

Stephen A. Womack

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AR District: 03

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/ Type

--

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/ Type

--

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

1000.00
---------

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

54000.00
----------



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Anderson for House**

Mailing Address 29177 477th Ave.

City	State	Zip Code
Hudson	SD	57034

Purpose of Disbursement  
2014 General

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : D9A0877771788429945

Amount of Each Disbursement this Period

-150.00
---------

Full Name (Last, First, Middle Initial)

**B. Baltimore for Iowa House**Mailing Address IIAI  
4000 Westown Parkway Suite 200

City	State	Zip Code
West Des Moines	IA	50266

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Transaction ID : 0015F6EBD2C8F3EF699

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Bradley for Arizona**

Mailing Address 5909 E. 3rd St.

City	State	Zip Code
Tucson	AZ	85711

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : 958B155A8BF28BA45E5

Amount of Each Disbursement this Period

200.00
--------

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

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

300.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Citizens for August**

Mailing Address P.O. Box 572

City Delavan	State WI	Zip Code 53115
-----------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

**Transaction ID : 95620685A838ECBC8E7**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Citizens for Bill Beagle**Mailing Address 115 S. Tippecanoe Drive  
P.O. Box 342

City Tipp City	State OH	Zip Code 45371
-------------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : 9DC94F40B5E933735BE**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Citizens for Kevin Bacon**

Mailing Address 260 N. Cassady Ave.

City Columbus	State OH	Zip Code 43209
------------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : 8AE3904743C17FD6E8A**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Bob Ashley**

Mailing Address P.O. Box 823

City Spencer	State WV	Zip Code 25276
-----------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

**Transaction ID : 05323F0CEC4A1C0E7BA**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Committee to Elect David C. Nohe**

Mailing Address 15 Chadwick Square

City Vienna	State WV	Zip Code 26105
----------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

**Transaction ID : C87CF410B8B83471993**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Gregory A. Tucker**

Mailing Address 1727 Webster Road

City Summersville	State WV	Zip Code 26651
----------------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

**Transaction ID : 3F9900F7E761C96D4CE**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Jim Morgan**

Mailing Address P.O. Box 117

City	State	Zip Code
Huntington	WV	25706

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Transaction ID : 0F197CC756FE3C523DD

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Ray Franz State Representative**

Mailing Address P. O. Box 25

City	State	Zip Code
Onokama	MI	49675

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : 7228743F12C7DEC56B8

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Steve Westfall**

Mailing Address 450 South Church Street

City	State	Zip Code
Ripley	WV	25271

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Transaction ID : 4DE68E851E6F415D96E

Amount of Each Disbursement this Period

250.00
--------

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

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

750.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Elect Eric Meyer**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Mailing Address 7765 N. Foothill Dr. S

City	State	Zip Code
Paradise Valley	AZ	85253

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**Transaction ID : 17E6A483DC3EA0D9DEB**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**B. Elect Jeff Farrington Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Mailing Address 8830 Summers Ct.

City	State	Zip Code
Utica	MI	48317

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**Transaction ID : 642DCEFD25B3C7C0DAC**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Eric Nelson for House of Delegates**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Mailing Address P.O. Box 186

City	State	Zip Code
Charleston	WV	26321

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**Transaction ID : EEB478BA3EA7AAC1924**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 102 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Geanie Morrison Campaign**

Mailing Address PO Box 4642

City	State	Zip Code
Victoria	TX	77903

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 0BC732335626C75D81F**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. George T. Darany for State Representative**

Mailing Address 17835 Oakwood Blvd.

City	State	Zip Code
Dearborn	MI	48124

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

**Transaction ID : 8D774BF7C9E3DDC60B5**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Goeff Hansen for Senate**

Mailing Address 4635 N. 68th Ave.

City	State	Zip Code
Hart	MI	49420

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

**Transaction ID : D01A489D1C1DA3A81A2**

Amount of Each Disbursement this Period

500.00
--------

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

1250.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. House Victory PAC**

Mailing Address 16018 E. Twin Acres Dr.

City	State	Zip Code
Gilbert	AZ	85298

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 058A7C3AA167018D931**

Amount of Each Disbursement this Period

375.00
--------

Full Name (Last, First, Middle Initial)

**B. Husted for Ohio**

Mailing Address 211 S. Fifth St.

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : C69C23AB86F533272CD**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. JB McCuskey for House of Delegates**

Mailing Address P.O. Box 11359

City	State	Zip Code
Chaleston	WV	25339

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

**Transaction ID : 361339FCE6692E50789**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1375.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 104 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Keiser for ND House District #47**

Mailing Address 422 Toronto Drive

City	State	Zip Code
Bismarck	ND	58503-0276

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 7468A5AFAF4D8AE9FE8**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**B. Kenneth Sheets for State Representative**Mailing Address 6333 E. Mockingbird Lane  
Suite 147 PMB 869

City	State	Zip Code
Dallas	TX	75214

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 47056D48A9044E0CF01**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kentucky House Democratic Caucus**

Mailing Address P.O. Box 4204

City	State	Zip Code
Frankfort	KY	40604

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : 7D04A496D99B139F624**

Amount of Each Disbursement this Period

250.00
--------

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

1450.00
---------

--



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 105 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Kevin Eltife Campaign**

Mailing Address 417 S. College

City	State	Zip Code
Tyler	TX	75702

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : 02E4EE82C5A34CDD962

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Klemin for ND House District 47**

Mailing Address 1709 Montego Drive

City	State	Zip Code
Bismarck	ND	58503

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : E3E71586CCC9C4CB1BD

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**C. Konni Burton for Texas State Senate**

Mailing Address 5212 Elm Street

City	State	Zip Code
Colleyville	TX	76034

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : B358A636DBE5AE62C6C

Amount of Each Disbursement this Period

1000.00
---------

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

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

2100.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 106 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Laffen for ND Senate District 43**

Mailing Address 3549 15th Ave. South

City	State	Zip Code
Grand Forks	ND	58201

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : CEE5DA5764820790138**

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**B. Larry Taylor for Texas Senate**

Mailing Address PO Box 1208

City	State	Zip Code
Friendswood	TX	77546

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 3802DD42D6263B42BBC**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Lois Kolkhorst Campaign**

Mailing Address PO Box 2546

City	State	Zip Code
Brenham	TX	77834

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 9A4B3CA262EAAB70E58**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2100.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Lovas for Arizona**

Mailing Address 7197 W. Mariposa Grande Ln

City	State	Zip Code
Peoria	AZ	85383

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 7B8F04F5B53E25FF53D**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Mike Green for Senate**

Mailing Address 1500 E Blackmore Road

City	State	Zip Code
Mayville	MI	48744

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

**Transaction ID : 0C5A81E37F38D9A7322**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Montenegro for House**

Mailing Address P.O. Box 2275

City	State	Zip Code
Litchfield Park	AZ	85340

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 9659791EC9B58342BEA**

Amount of Each Disbursement this Period

200.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00
--------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

**A. Oehlke for ND Senate District 15**

Mailing Address 125 Woodlea Drive

City	State	Zip Code
Devils Lake	ND	58301

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : D7DC556564709A425D6

Amount of Each Disbursement this Period

150.00
--------

Full Name (Last, First, Middle Initial)

**B. Pasdon for House of Delegates**

Mailing Address P. O. Box 106

City	State	Zip Code
Morgantown	WV	26507

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	08	/	2014

Transaction ID : ACC5279FFA43CBD138D

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Re-Elect Debbie Lesko**

Mailing Address P.O. Box 5292

City	State	Zip Code
Peoria	AZ	85385

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : 7BB9758EC74126B94B2

Amount of Each Disbursement this Period

200.00
--------

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

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

600.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Senate Victory PAC**

Mailing Address 727 E. Bethany Home Rd., Suite B10

City	State	Zip Code
Phoenix	AZ	85014

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 6BB20DB385F88DB5E7E**

Amount of Each Disbursement this Period

375.00
--------

Full Name (Last, First, Middle Initial)

**B. Sorvaag for ND House District 45**

Mailing Address 3402 Birdie St. North

City	State	Zip Code
Fargo	ND	58102

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : C94D66CDD6802FDCE1C**

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**C. Sukut for ND House District #1**

Mailing Address 1603 Fourth Avenue East

City	State	Zip Code
Williston	ND	58801-4324

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 08B10FFD192EAF2071A**

Amount of Each Disbursement this Period

100.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

575.00
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Texans for Kelly Hancock**

Mailing Address P. O. Box 821349

City	State	Zip Code
North Richland Hills	TX	76182

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 1B8E805A0746AA6D68B**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Tom Leonard for State Representative**

Mailing Address P.O. Bod 261

City	State	Zip Code
DeWitt	MI	48820

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

**Transaction ID : E40CD4A052D5EFC2335**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Vigesaa for ND House District #23**

Mailing Address P. O. Box 763

City	State	Zip Code
Cooperstown	ND	58425-0763

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : 91840866B2CA31EAEA7**

Amount of Each Disbursement this Period

150.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1400.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 111

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Vote Livingston LD 22**Mailing Address 7992 West Thunderbird Rd  
Ste 111-LD22

City Peoria State AZ Zip Code 85381

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : 04928F5997934FD054C**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**B. Wardner for ND House District 37**

Mailing Address 1042 12th Ave. West

City Dickinson State ND Zip Code 58601

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : 12806DC41AAAC1F6636**

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**C. Wayne Faircloth Campaign**

Mailing Address PO Box 1226

City Dickinson State TX Zip Code 77539

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : 2A52AC4CD9201815CFE**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00
---------

16350.00
----------