

**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 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SENTRY INSURANCE A MUTUAL COMPANY FEDERAL POLITICAL ACTION COMMITTEE

A. PETER G MCPARTLAND
Full Name (Last, First, Middle Initial)

Mailing Address 3753 OAK MORaine COURT

City State Zip Code
STEVENS POINT WI 54482

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

Name of Employer Occupation
SENTRY INSURANCE A MUTUAL CO CHAIRMAN, PRESIDENT & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
3000.00

B. CHRISTOPHER C MEADOWS
Full Name (Last, First, Middle Initial)

Mailing Address 2117 MAIN STREET

City State Zip Code
STEVENS POINT WI 54481

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

Name of Employer Occupation
SENTRY INSURANCE A MUTUAL CO AVP EQUITY INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
500.00

C. SCOTT A MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1590 RAPID RIVER RUN

City State Zip Code
PLOVER WI 54467

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

Name of Employer Occupation
SENTRY INSURANCE A MUTUAL CO VP SEGMENT EXEC NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.4201

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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