

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

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

2. **FEC IDENTIFICATION NUMBER** C00343749
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2006 through 06 30 2006

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 Michael Campbell
Signature of Treasurer Electronically Filed by Michael Campbell Date 07 13 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		20770.02
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	24433.02									
(c) Total Receipts (from Line 19)	15727.50	20390.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40160.52	41160.52								
7. Total Disbursements (from Line 31)	500.00	1500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39660.52	39660.52								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	11440.00	11914.00
(i) Itemized (use Schedule A)	4287.50	8476.50
(ii) Unitemized	15727.50	20390.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15727.50	20390.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	15727.50	20390.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15727.50	20390.50

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	500.00	1500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	500.00	1500.00

DETAILED SUMMARY PAGE
of Disbursements

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)	15727.50	20390.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15727.50	20390.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<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

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

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

A. Full Name (Last, First, Middle Initial)
Daniel Beacom

Mailing Address 11552 Village Ridge Road

City San Diego State CA Zip Code 92131

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

Name of Employer GEICO Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15177

Amount of Each Receipt this Period
 250.00

Individual Contribution

B. Full Name (Last, First, Middle Initial)
Lynda D'Amato

Mailing Address 11503 Caminito Corriente

City San Diego State CA Zip Code 92128

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

Name of Employer GEICO Occupation AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.15089

Amount of Each Receipt this Period
 30.00

Payroll deduction \$10.00 biweekly

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

Mailing Address 2902 Gretna Place

City Vienna State VA Zip Code 22181

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

Name of Employer GEICO Occupation AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15178

Amount of Each Receipt this Period
 750.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1030.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. John Geer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2902 Gretna Place		Transaction ID: SA11A1.15003	
City State Zip Code Vienna VA 22181	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly	
Name of Employer Occupation GEICO AVP	Aggregate Year-to-Date ▼ 950.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. John Geer		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	
Mailing Address 2902 Gretna Place		Transaction ID: SA11A1.15127	
City State Zip Code Vienna VA 22181	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly	
Name of Employer Occupation GEICO AVP	Aggregate Year-to-Date ▼ 1010.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Lily Hopkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 12962 Marcy Ranch Rd		Transaction ID: SA11A1.11069	
City State Zip Code Santa Ana CA 92705	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C		Individual Contribution	
Name of Employer Occupation GEICO VP	Aggregate Year-to-Date ▼ 830.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Lily Hopkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 12962 Marcy Ranch Rd		Transaction ID: SA11A1.10909	
City State Zip Code Santa Ana CA 92705	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly		
Name of Employer Occupation GEICO VP	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 850.00		

Full Name (Last, First, Middle Initial) B. Lily Hopkins		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	
Mailing Address 12962 Marcy Ranch Rd		Transaction ID: SA11A1.11033	
City State Zip Code Santa Ana CA 92705	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly		
Name of Employer Occupation GEICO VP	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 880.00		

Full Name (Last, First, Middle Initial) C. Donald Lyons		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 11616 Swains Lock Terrace		Transaction ID: SA11A1.11070	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Individual Contribution		
Name of Employer Occupation GEICO Sr. VP	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1075.00		

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Donald Lyons		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 11616 Swains Lock Terrace		Transaction ID: SA11A1.10922	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$15.00 biweekly	
Name of Employer Occupation GEICO Sr. VP	Aggregate Year-to-Date ▼ 1105.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Donald Lyons		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	
Mailing Address 11616 Swains Lock Terrace		Transaction ID: SA11A1.11043	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$15.00 biweekly	
Name of Employer Occupation GEICO Sr. VP	Aggregate Year-to-Date ▼ 1150.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Robert Miller		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	
Mailing Address 2820 Amherst Avenue		Transaction ID: SA11A1.15065	
City State Zip Code University Park TX 75225	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly	
Name of Employer Occupation GEICO Regional VP	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	135.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Olza Nicely		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2006	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.14898	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 170.00		
FEC ID number of contributing federal political committee. C	Payroll deduction \$85.00 biweekly		
Name of Employer Occupation GEICO President-Insurance operations	Aggregate Year-to-Date ▼ 648.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Olza Nicely		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.15022	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 170.00		
FEC ID number of contributing federal political committee. C	Payroll deduction \$85.00 biweekly		
Name of Employer Occupation GEICO President-Insurance operations	Aggregate Year-to-Date ▼ 818.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Olza Nicely		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.15143	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 255.00		
FEC ID number of contributing federal political committee. C	Payroll deduction \$85.00 biweekly		
Name of Employer Occupation GEICO President-Insurance operations	Aggregate Year-to-Date ▼ 1073.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	595.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 500 W. Harbor Dr. Apt. 806		Transaction ID: SA11A1.15174	
City San Diego	State CA	Zip Code 92101	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		Individual Contribution	
Name of Employer GEICO	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00		

B. Full Name (Last, First, Middle Initial) William Roberts		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6	
Mailing Address 6529 79th Place		Transaction ID: SA11A1.14904	
City Cabin John	State MD	Zip Code 20818	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly	
Name of Employer GEICO	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) William Roberts		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 6529 79th Place		Transaction ID: SA11A1.15029	
City Cabin John	State MD	Zip Code 20818	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly	
Name of Employer GEICO	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. William Roberts		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 6529 79th Place		Transaction ID: SA11A1.15150
City Cabin John	State MD	Zip Code 20818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. George Rogers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 5120 Highlands By The Lake Drive		Transaction ID: SA11A1.15175
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer GEICO	Occupation VP	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1540.00	

Full Name (Last, First, Middle Initial) C. George Rogers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5120 Highlands By The Lake Drive		Transaction ID: SA11A1.14984
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$6.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1552.00	

SUBTOTAL of Receipts This Page (optional)	▶	1587.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
George Rogers

Mailing Address 5120 Highlands By The Lake Drive

City State Zip Code
Lakeland FL 33813

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

Name of Employer Occupation
GEICO VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1570.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2006

Transaction ID: SA11A1.15109

Amount of Each Receipt this Period
18.00

Payroll deduction \$6.00 biweekly

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

Mailing Address 12713 Westly Lane

City State Zip Code
San Diego CA 92131

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

Name of Employer Occupation
GEICO manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
790.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2006

Transaction ID: SA11A1.15173

Amount of Each Receipt this Period
750.00

Individual Contribution

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

Mailing Address 12713 Westly Lane

City State Zip Code
San Diego CA 92131

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

Name of Employer Occupation
GEICO manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2006

Transaction ID: SA11A1.14974

Amount of Each Receipt this Period
10.00

Payroll deduction \$5.00 biweekly

SUBTOTAL of Receipts This Page (optional)	778.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Margaret Rogers Mailing Address 12713 Westly Lane City San Diego State CA Zip Code 92131 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006 Transaction ID: SA11A1.15099 Amount of Each Receipt this Period 15.00 Payroll deduction \$5.00 biweekly
Name of Employer GEICO Occupation manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 815.00	

B. Full Name (Last, First, Middle Initial) David Schindler Mailing Address 9605 Autumn Oaks Court City Rockville State MD Zip Code 20850 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006 Transaction ID: SA11A1.15161 Amount of Each Receipt this Period 1500.00 Individual Contribution
Name of Employer GEICO Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1580.00	

C. Full Name (Last, First, Middle Initial) David Schindler Mailing Address 9605 Autumn Oaks Court City Rockville State MD Zip Code 20850 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006 Transaction ID: SA11A1.15033 Amount of Each Receipt this Period 20.00 Payroll deduction \$10.00 biweekly
Name of Employer GEICO Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	1535.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
David Schindler

Mailing Address 9605 Autumn Oaks Court

City State Zip Code
Rockville MD 20850

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

Name of Employer Occupation
GEICO VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1630.00

Date of Receipt
06 / 29 / 2006

Transaction ID: SA11A1.15154

Amount of Each Receipt this Period
30.00

Payroll deduction \$10.00
biweekly

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

Mailing Address 800 North Michigan Ave, Unit 4501

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Plaza Investment Managers President - Capital operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 19 / 2006

Transaction ID: SA11A1.14909

Amount of Each Receipt this Period
100.00

Payroll deduction \$50.00
biweekly

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

Mailing Address 800 North Michigan Ave, Unit 4501

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Plaza Investment Managers President - Capital operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 18 / 2006

Transaction ID: SA11A1.15034

Amount of Each Receipt this Period
100.00

Payroll deduction \$50.00
biweekly

SUBTOTAL of Receipts This Page (optional) ▶ 230.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 19
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Louis Simpson		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address 800 North Michigan Ave, Unit 4501		Transaction ID: SA11A1.15155	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly	
Name of Employer Plaza Investment Managers	Occupation President - Capital operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

B. Full Name (Last, First, Middle Initial) Jan Stewart		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 715 Dale Dr		Transaction ID: SA11A1.15170	
City Silver Spring	State MD	Zip Code 20910	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Individual Contribution	
Name of Employer GEICO	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

C. Full Name (Last, First, Middle Initial) Jan Stewart		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 715 Dale Dr		Transaction ID: SA11A1.15036	
City Silver Spring	State MD	Zip Code 20910	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$5.00 biweekly	
Name of Employer GEICO	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Jan Stewart		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address 715 Dale Dr		Transaction ID: SA11A1.15157	
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$5.00 biweekly	
Name of Employer GEICO	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) B. Joseph Thomas		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 1708 Dalwood Meadows		Transaction ID: SA11A1.15179	
City State Zip Code Virginia Beach VA 23455	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C		Individual Contribution	
Name of Employer GEICO	Occupation AVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1655.00		

Full Name (Last, First, Middle Initial) C. Joseph Thomas		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1708 Dalwood Meadows		Transaction ID: SA11A1.14989	
City State Zip Code Virginia Beach VA 23455	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly	
Name of Employer GEICO	Occupation AVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1705.00		

SUBTOTAL of Receipts This Page (optional) ▶	1565.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 19	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 1708 Dalwood Meadows

City State Zip Code
 Virginia Beach VA 23455

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

Name of Employer Occupation
 GEICO AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1780.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2006

Transaction ID: SA11A1.15114

Amount of Each Receipt this Period
 75.00

Payroll deduction \$25.00
 biweekly

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	11440.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 19

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

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

Full Name (Last, First, Middle Initial) A. Friends of Menor Campaign Committee		Transaction ID: SB23.14917	
Mailing Address 220 South King Street, Suite 1770		Date of Disbursement 05 / 01 / 2006	
City Honolulu	State HI	Zip Code 96813	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Campaign Contribution		011 Category/ Type	
Candidate Name Friends of Menor Campaign Committee			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: HI	District: 2		

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	500.00