FEC FORM 3X	AN	PORT OI ID DISBU Other Than An	RSEM	ENTS	ee	Of	ffice Use Only
1. NAME OF COMMITTEE (in fu		FEC MAILING LA YPE OR PRINT 🙀		ample:If typing or the lines	, type		
CUNA Mutual Insu	rance Society Po	olitical Action Comr					
ADDRESS (number and	street)	010 Mineral Point R	d, PO Box 747				
Check if differ than previously reported. (ACC	ent Li	ail Stop 5910 4 A2					53701 0747
2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛕		S	STATE	ZIPCODE
C00402107	• • • •	]	3. IS THIS REPORT		NEW N) <b>OR</b>	AMEN (A)	IDED
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M	orts: Report(Q1) Report(Q2) 5 Report(Q3) 81 Report(YE) lid-Year on-election	b) Monthly Report Due On: (c) 12-Day PRE-Electi Report for (d) 30-Day Post -Elec	the:		12C)	Aug 20 Sep 20 Oct 20 ( General (120 Special (120	(M9) Year Only) Dec 20 (M12) (Non-Election Year Only) (M10) Jan 31 (YE) G) Runoff (12R) in the State of
Terminati (TER)	on Report	Report for	the:				in the State of
5. Covering Period	01	01 201	1	through	06	30 2	011
I certify that I have exam Type or Print Name of T Signature of Treasurer		Christopher P. Roe	my knowledge oher P. Roe	and belief it is		and complete.	28 2011
NOTE : Submission of f	alse, erroneous,	, or incomplete info	mation may su	bject the pers	on signing this	Report to the per	nalties of 2 U.S.C 437g.
Office Use Only							FEC FORM 3X (Rev. 12/2004)

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

F	Report Covering the Period: From:	D D Y Y Y Y Y 01 2011	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2011 <sup>Y Y Y</sup>		15235.36
	(b) Cash on Hand at Begining of Reporting Period	15235.36	
	(c) Total Receipts (from Line 19)	21953.08	21953.08
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37188.44	37188.44
7.	Total Disbursements (from Line 31)	21000.00	21000.00
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	16188.44	16188.44
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 BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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

FE6AN026

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

м м 01 01 м м 06 30 D 2011 D 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period Calendar Year-to-Date** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 16905.08 16905.08 (i) Itemized (use Schedule A) ..... 4798.00 4798.00 (ii) Unitemized ..... (iii) TOTAL (add 21703.08 21703.08 Lines 11(a)(i) and (ii) ..... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees (C) 0.00 0.00 (such as PACs) ..... (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 21703.08 21703.08 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 250.00 250.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 21953.08 21953.08 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 21953.08 21953.08 (subtract Line 18(c) from Line 19) .....

FE6AN026

Page 3

of Disbursements

J	DISDU	irsem	ients

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share (b) Other Federal Operating	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii) and (b)) 🕨	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	21000.00	21000.00
Independent Expenditure (use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
(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
. Other Disbursements	0.00	0.00
<ul> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> </ul>		
(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
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21000.00	21000.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	21000.00	21000.00
	21000.00	21000.00

# 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)	21703.08	21703.08
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	21703.08	21703.08
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

FE6AN026

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	<b>3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 6 / 26         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used by any perso ing the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society	Political Action Committee (CUNA Mutual PAC	C)
Full Name (Last, First, Middle Initial) James S. Buchheim		Date of Receipt
Mailing Address 4598 Autumn Bla	aze Trail	0 6 3 0 Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: SA11AI.5585
DeForest	WI 53532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer CUNA Mutual Insurance Soc-	Occupation VP - PR & Communications	\$25/biweekly
iety Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Michael Connealy		Date of Receipt
Mailing Address 463 Waycliffe Dr	ive N	M         M         /         D         D         /         Y
City	State Zip Code	Transaction ID: SA11AI.5681
Wayzata	MN 55391-1383	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00 - Check
Name of Employer Pro Ag Management, Inc.	Occupation Executive	
Receipt For:	Aggregate Year-to-Date 🔻	
<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	900.00	
Full Name (Last, First, Middle Initial) Dennis Daggett		Date of Receipt
Mailing Address 2253 Carver Roa	ıd	M M / D D / Y Y Y Y 05 28 2011
City	State Zip Code	Transaction ID: SA11AI.5679
Winterset	IA 50273-8378	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer ProAg Management, Inc.	Occupation Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optic	onal)	1700.00
	umber only)	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	$\begin{array}{c c} X & 11a \\ \hline X & 11a \\ \hline 13 \\ \hline 14 \\ \hline 15 \\ \hline 16 \\ \hline 17 \\ \hline \end{array}$
	or for commercial purposes, other than using th	Statements may not be sold or used by any e name and address of any political commi	r person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Poli	ical Action Committee (CUNA Mutua	al PAC)
A.	Full Name (Last, First, Middle Initial) Michael T. Defnet		Date of Receipt
	Mailing Address 8315 Flagstone Drive		06 / 0 0 / Y Y Y Y 0 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.5588
	Madison	WI 53719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	480.00
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation SVP, Distribution Support	\$40/biweekly
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify)     Image: Content of the specify of the specific of the specifi	480.0	0
— В.	Full Name (Last, First, Middle Initial) Renee Dykes	1	Date of Receipt
	Mailing Address 331 Point Drive		M M / D D / Y Y Y Y 0 4 15 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.5690
	Great Bend	KS 67530	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer CPI Qualified Plan Consul- tants	Occupation Executive	Check
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify)     Image: Content of the specify of the specific of the specifi	500.0	0
– C.	Full Name (Last, First, Middle Initial) Thomas R. Eckert		Date of Receipt
	Mailing Address 2612 Waunona Way		0 6 / D D / Y Y Y Y 0 6 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.5595
	Madison	WI 53713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation VP - Retirement	\$25/biweekly
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	300.0	0
Γ	SUBTOTAL of Receipts This Page (optional)		1280.00
	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 8/26         (check only one)       11a         X       11a       11b         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 for 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) CUNA Mutual Insurance Society Polit	ical Action Committee (CUNA Mutual PAC	C)							
2 A.	Full Name (Last, First, Middle Initial) David M. Foster		Date of Receipt							
	Mailing Address 9125 Blackhawk Road	1								
	City	State Zip Code	Transaction ID: SA11AI.5596							
	Middleton	WI 53562	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C	240.00							
	Name of Employer CUNA Mutual Insurance Soc- ietv	Occupation VP, Product Sales Distribution	- \$20/biweekly							
	Receipt For:	Aggregate Year-to-Date ▼	_							
	Primary     General       Other (specify)	240.00								
- 3.	Full Name (Last, First, Middle Initial) Jon G. Furlow	1	Date of Receipt							
	Mailing Address 717 Oneida Place		M         M         /         D         D         Y							
	City	State Zip Code	Transaction ID: SA11AI.5597							
	Madison	WI 53711	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C	300.00							
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation VP, Office of General Counsel	- \$25/biweekly							
	Receipt For:	Aggregate Year-to-Date 🔻								
	Primary   General     Other (specify)   Image: Constraint of the second seco	300.00								
;.	Full Name (Last, First, Middle Initial) Daniel K. Kaiser	1	Date of Receipt							
	Mailing Address N8880 Blue Vista Lan	е	0 6 / 3 0 / Y Y Y Y 0 1 1							
	City	State Zip Code	Transaction ID: SA11AI.5605							
	New Glarus	WI 53774	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C	240.00							
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation VP - Sales	- \$20/biweekly							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00								
Γ	SUBTOTAL of Receipts This Page (ontional)	۱ ۲	780.00							
	SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		780.00							

[	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 9 / 26           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17           on for the purpose of soliciting contributions         up on purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Politi			
۷ A.	Full Name (Last, First, Middle Initial) Randy P. Kohout Mailing Address 5588 Polo Ridge			Date of Receipt
	City	State	Zip Code	
	Westport	WI	53597	Transaction ID: SA11AI.5610 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		240.00
	Name of Employer CUNA Mutual Insurance Soc- iety	- <b>1</b>	anizational Capability	\$20/biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 240.00	]
- B.	Full Name (Last, First, Middle Initial) Stephen W. Koslow Mailing Address N53 W16098 Waldens	s Pass		Date of Receipt
				06 30 2011
	City	State	Zip Code	Transaction ID: SA11AI.5611
	Menomonee Falls FEC ID number of contributing federal political committee.	C	53051	Amount of Each Receipt this Period 375.00
	Name of Employer CUNA Mutual Insurance Soc- iety	1.1	nief Ethics & Compliance Of	fice
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 375.00	]
- C.	Full Name (Last, First, Middle Initial) Deborah F Kretchmar Mailing Address 817 Stagecoach Trail	1		Date of Receipt
				06 30 2011
	City	State	Zip Code	Transaction ID: SA11AI.5614
	Madison FEC ID number of contributing federal political committee.	C	53717	Amount of Each Receipt this Period 240.00
	Name of Employer CUNA Mutual Grouop	Occupatio Officer	n	\$20/biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 240.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			855.00
	TOTAL This Period (last page this line number	r only)		

				FOR LINE NUMBER: PAGE 10 / 26	
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)	
			for each category of the	X 11a 11b 11c 12	
			Detailed Summary Page		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements managements managements and additional and additional additi	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)				
	CUNA Mutual Insurance Society Politica	al Action C	committee (CUNA Mutual PA	C)	
A.	Full Name (Last, First, Middle Initial) Kevin T. Lentz			Date of Receipt	
	Mailing Address 1023 Carib Court			M · M         /         D · D         Y         Y · Y         <	
	City	State	Zip Code	Transaction ID: SA11AI.5616	
	Verona	WI	53593	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		600.00	
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupatio SVP, Me	n ember Products	\$50/biweekly	
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼	0 0	600.00	]	
- В.	Full Name (Last, First, Middle Initial) Kurt Lin			Date of Receipt	
	Mailing Address 99013 Settlers Road			M M / D D / Y Y Y Y 06 30 2011	
	City	State	Zip Code	Transaction ID: SA11AI.5617	
	Madison	WI	53717	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		480.00	
	Name of Employer MEMBERS Capital Advisors	Occupatio	n	\$40/biweekly	
	MEMBERS Capital Advisors	Managin	g Director, MCA		
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General		480.00	1	
_	Other (specify)	0 0			
C.	Full Name (Last, First, Middle Initial) David P. Marks			Date of Receipt	
	Mailing Address 11 Richmond Road			$ \begin{array}{c c} M & M & / \\ \hline 0 & 6 \\ \end{array} \begin{array}{c} D & D \\ \hline 3 & 0 \\ \end{array} \begin{array}{c} Y & Y & Y \\ \hline 2 & 0 & 1 & 1 \\ \end{array} $	
	City	State	Zip Code	Transaction ID: SA11AI.5621	
	West Hartford	CT	06117	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		480.00	
	Name of Employer Members Capital Advisors	Occupatio EVP & C	n hief Investment Off.	\$40/biweekly	
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary     General       Other (specify) ▼	0 0	480.00	]	
ſ	SUBTOTAL of Receipts This Page (optional)		·····	1560.00	
F	TOTAL This Period (last page this line number or	nly)			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and addr	ress of any political committee to	o solicit contributions from such committee.
	CUNA Mutual Insurance Society Politi	tical Action Co	mmittee (CUNA Mutual PA	(C)
Α.	Full Name (Last, First, Middle Initial) Mark Martin	Date of Receipt		
	Mailing Address 1805 Autumn Hill Driv	/e		04 / 25 / Y Y Y 2011
	City	State	Zip Code	Transaction ID: SA11AI.5689
	Verona	WI	53593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer CUNA Mutual Group	Occupation VP, P&C (		Check
	Receipt For:		Year-to-Date V	
	Primary General Other (specify) ▼	0 0	250.00	]
- В.	Full Name (Last, First, Middle Initial) Thomas J. Martorana			Date of Receipt
	Mailing Address 910 Winding Way			06 30 Y Y Y Y 2011
	City	State	Zip Code	Transaction ID: SA11AI.5622
	Middleton	WI	53562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer CUNA Mutual Insurance Soc- jety	Occupation SVP, Ope		\$25/biweekly
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼	0 0	300.00	]
- C.	Full Name (Last, First, Middle Initial) Thomas J. Merfeld	1		Date of Receipt
	Mailing Address 3088 Edenberry St.			M M / D D / Y Y Y Y 06 30 2011
	City	State	Zip Code	Transaction ID: SA11AI.5625
	Fitchburg	WI	53711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		360.00
	Name of Employer MEMBERS Capital Advisors	Occupation Chief Risk		\$30/biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 360.00	
	SUBTOTAL of Receipts This Page (optional)		······	910.00
ſ	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 12 / 26         (check only one)       11a         X       11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Politi	ical Action C	ommittee (CUNA Mutual PA	.C)
A.	Full Name (Last, First, Middle Initial) James Metz			Date of Receipt
	Mailing Address 3908 Meridian Circle			0 6 / 0 0 / Y Y Y Y 0 0 0 / 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.5626
	Verona	WI	53593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		480.00 \$40/biweekly
	Name of Employer MEMBERS Capital Advisors	Occupation SVP, Ass	<sup>n</sup> set Management	\$40/bliweekiy
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	480.00	
— В.	Full Name (Last, First, Middle Initial) Andrew J. Michie			Date of Receipt
	Mailing Address 1453 Starr Grass Dr			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: SA11AI.5627
	Madison	WI	53719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00 \$20/biweekly
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation VP, Inter	n nal Audit	\$20/DIWEEKIY
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	240.00	
– c.	Full Name (Last, First, Middle Initial) Dana Miller			Date of Receipt
	Mailing Address P.O. Box 807			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: SA11AI.5687
	LaCrosse	KS	67548	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer CPI Qualified Plan Consul- tants	Occupation Executive	9	Check
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼		600.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1320.00
	TOTAL This Period (last page this line number	r only)		

Mailing Address       6535 Kimberly Way         City       State       Zip Code         DeForest       WI       53532         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Enployer CUNA Mutual Group       Occupation Officer       S25/biweekly         Primary       General Other (specify) ▼       300.00         Full Name (Last, First, Middle Initial) Faye Patzner       Aggregate Year-to-Date       ▼         Mailing Address       4473 Shooting Star Avenue       Middleton       Middleton         City       State       Zip Code       Middleton       S300 / Yoy Y         Receipt For:       C       General       Other (specify) ₹       Date of Receipt         City       State       Zip Code       Middleton       S300 / Yoy Y       Zoy J / Yoy Y         Receipt For:       C       General       Occupation       S25/biweekly       S25/biweekly         Mailing Address       4473 Shooting Star Avenue       C       S25/biweekly       S25/biweekly         FEC ID number of contributing federal political committee.       C       General       S25/biweekly       S25/biweekly         Primary       General       Occupation       SVP, Legal       S25/biweekly					
ITEMIZED RECEIPTS       for each category of the Detailed Summary Page       Control of the Detailed Summary Page         Any information copied from such Reports and Statements may not be sold or used by any period for the purpose of soliding committee.       Amount of the purpose of soliding committee.         Any information copied from such Reports and Statements may not be sold or used by any period for the purpose of soliding committee.       Amount of the purpose of soliding committee.         Any information copied from such Reports and Statements may not be sold or used by any period for the purpose of soliding committee.       Amount of soliding committee.         Any information copied from such Reports and Statements may not be sold or used by any period for soliding committee.       Date of Recopiet         Amount (Last, First, Middle Initia)       Timeset of contributing federal political committee.       Date of Recopiet         PEC: Do number of contributing federal political committee.       Occupation       Officion         Receipt For:       Occupation       Officion       State         Pill Name (Last, First, Middle Initia)       State       Zip Code       Amount of Each Receipt Hip Period         Middleton       Will SSS2       State       Zip Code       Amount of Each Receipt Hip Period         Pill Name (Last, First, Middle Initia)       Eiger Plateau       Date of Receipt       Apprepative Var-to-Date V       Official Control         Pill Name (Last, First, Middle		SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	
Detailed Summary Page       113       10       15       14         Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliding contributions from such committee.       Anter Contributions from such committee.         NAME OF COMMITTEE (in Full)       CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)         Full Name (Last, First, Middle Initia)       Transaction ID;         Maing Address       6535 Kimberly Way         City       State       Zip Code         Deforest       WI       53532         FED ID number of contributing federal political committee.       City         B. Face Face       Officer         Receipt For:       Operative         Primary       General         Other (specify) ▼       State         Primary       General         Other (specify) ▼       State         B. Face Face       Aggregate Vacto Date ▼         Maing Address       4473 Shooting Star Avenue         City       State         Other (specify) ▼       420.00         State       Zip Code         Midiation       State         Primary       General         Other (specify) ▼       420.00         State       Zip Cod		TEMIZED RECEIPTS		for each category of the	
Ave information capiel from such Reports and Statemets may not be sold or used by any person for the purpose of solicit contributions.         NAME OF COMMITTEE (in Full)         CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)         Full Name (Last, First, Middle Initial)         Timedy Adverse         Otiv         State         Zip Code         DeForest         Wil         State         Zip Code         Name of contributing tederal political committee.         City         State         DeForest         Wil         Other (specify)         Other (specify)         Other (specify)         State         Deforest         Mailing Address         Address         Aggregate Year-to-Date         Other (specify)         State         Date of Receipt         Other (specify)         Every Flamer         Mailing Address         Address         Adgregate Year-to-Date         Other (specify)         State         Date of Receipt         Other (specify)         Other (specify)         Other (specif	-	······································		Detailed Summary Page	
A       Full Name (Last, First, Middle Initial)         Imathy A Murvin       Date of Receipt         Mailing Address       6535 Kimberty Way         City       State       Zip Code         DeForest       W1       53532         FEGL Dnumber of contributing rederal political committee       C       Angregate Year-to-Date         Nemore (Last, First, Middle Initial)       Officer       Angregate Year-to-Date         Preceipt For:       Aggregate Year-to-Date       State       Zip Code         Primary       General       State       Zip Code       Anount of Each Receipt ins Period         City       Mailing Address       4473 Shooting Star Avenue       Date of Receipt       Transaction Ib: SA11A1.5636         Mailing Address       4473 Shooting Star Avenue       Date of Receipt ins Period       20 (1, 1)         City       State       Zip Code       Anount of Each Receipt ins Period         FEC ID number of contributing referse political committee       C       Anount of Each Receipt ins Period         Primary       General       Occupation SVP, Legal       Aggregate Year-to-Date       Aggregate Year-to-Date         Receipt For:       Aggregate Year-to-Date       Maing Address       420.00       \$25/biweekly         City       Mutual Initial) <t< th=""><th></th><th>Any information copied from such Reports and S or for commercial purposes, other than using the</th><th>tatements ma name and ac</th><th>ay not be sold or used by any per- ddress of any political committee</th><th>son for the purpose of soliciting contributions</th></t<>		Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ac	ay not be sold or used by any per- ddress of any political committee	son for the purpose of soliciting contributions
A.       Full Name (Last, First, Middle Initial) Timothy Alluwin Mailing Address 6535 Kimberly Way City         State Zip Code         S552 DeForest         Wl         S552 Percept Percept         Percept Percept         Percept Percept         Percept Percept         Percept Percept         Percept         Percept Percept         Percept         Percept Percept         Percept         Percept Percept         Percept         Percept Percept         Percept         Percept Percept         Percept		NAME OF COMMITTEE (In Full)			
A.       Timothy A Murvin Mailing Address 6535 Kimberly Way       Date of Receipt         City       State       Zip Code         DeForest       Wil       5352         FEC ID number of contributing tederal political committee.       C       anount of Each Receipt this Period         Percept For:       Occupation       300.00       \$25/biweekly         Percept For:       Aggregate Year-to-Date       Image: Committee       300.00         Provided for:       Aggregate Year-to-Date       Image: Committee       Image: Committee         B.       Full Name (Last, First, Middle Initial)       Fage Patzner       Date of Receipt         Mailing Address       4473 Shooting Star Avenue       Image: Committee       Image: Committee         City       State       Zip Code       Amount of Each Receipt the Period         Mailing Address       4473 Shooting Star Avenue       Image: Committee       Image: Committee         City       State       Zip Code       Amount of Each Receipt the Period         Mailing Address       4473 Shooting Star Avenue       Image: Committee       Image: Committee         City       State       Zip Code       Amount of Each Receipt the Period       Image: Committee         Name of tendpoyer       Occupation       SVP, Legal       Image: Com		CUNA Mutual Insurance Society Politic	cal Action C	Committee (CUNA Mutual P	AC)
City       State       Zip Code         DeForest       WI       53552         FEC ID number of contributing       C       Amount of Each Receipt this Period         State of Energiever       Occupation       Officer         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt Ide Initial)         Paye Pattner       Aggregate Year-to-Date ▼       Date of Receipt Ide Initial)         Full Name (Last, First, Middle Initial)       State       Zip Code         Paye Pattner       Mailing Address       4473 Shooting Star Avenue       Date of Receipt         City       State       Zip Code       Amount of Each Receipt Ide Initial)         Paye Pattner       Mailing Address       4473 Shooting Star Avenue       Date of Receipt         City       State       Zip Code       Amount of Each Receipt Ide Is Period         Pederal political committee.       C       Aggregate Year-to-Date ▼       420.00         VP, Legal       Aggregate Year-to-Date ▼       Pederal Political Committee.       25/biweekly         Name of Employer       Occupation       SVP, Legal       Date of Receipt Ide Is Period         City       State       Zip Code       Aggregate Year-to-Date ▼       Primary Code         Mailing Address       Aggregate Year-to-Date ▼	A.	Timothy A Murwin			Date of Receipt
DeForest       WI       53532       Amount of Each Receipt this Period         FEC ID number of contributing federal policial committee.       C       300.00         Name of Employer CUNA Mutual Stopp       Occupation Officer       S25/biweekly         Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         B.       Full Name (Last, First, Middle Initial) Fage Pattorer       S300.00       S25/biweekly         City       State       Zip Code       Middleton       Name of Contributing federal policial committee.         City       State       Zip Code       Amount of Each Receipt this Period         Receipt For:       Occupation SVP, Legal       Amount of Each Receipt this Period         Period       C       Occupation SVP, Legal       S25/biweekly         Name of Employer       Occupation SVP, Legal       S25/biweekly         Other (specify) ▼       420.00       S25/biweekly         C.       Full Name (Last, First, Middle Initial)       Baread Paeuloh       Date of Receipt         Genard Paeuloh       Maling Address       4889 Champions Run       Tanasection Dis SA11A1.5637         City       State       Zip Code       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C					06 30 2011
FEC ID number of contributing federal political committee.       C       300.00         Name of Employer CUNA Mutual Group       Officer       \$25/biweekly         B.       Face pit For: Primary       General       0         Fill Name (Last, First, Middle Initial)       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address       4473 Shooting Star Avenue       Date of Receipt         City       State       Zip Code         Middleton       W1       53562         FEC ID number of contributing federal political committee.       Occupation         Vieweekly       SVP, Legal         Aggregate Year-to-Date ▼       420.00         C.       General Other (specify) ▼       Occupation         C.       General Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General       Occupation         City       State       Zip Code         Middleton       W1       S3562         FEC ID number of contributing federal political committee.       C         City       State       Zip Code         Mailing Address       4889 Champions Run       General         City       State       Zip Code         Middleton       W1       S3562				•	
federal political committee.       SUUND         Nume of Employer       Occupation         Other (specify) ▼       Aggregate Year-to-Date ▼         B.       Faye Patzner         Middleton       W1         City       State         Primary       General         Other (specify) ▼       Occupation         City       State         Primary       General         Other (specify) ▼       Occupation         City       State         Primary       General         Other (specify) ▼       Occupation         State       Zip Code         Middleton       W1         State       Occupation         SVP, Legal       Aggregate Year-to-Date         Primary       General         Other (specify) ▼       Aggregate Year-to-Date         Primary       General         Other (specify) ▼       Aggregate Year-to-Date         Mailing Address       4889 Champions Run         City       State       Zip Code         Middleton       W1       S3562         Full Name (Last, First, Middle Initial)       State       Zip Code         Middleton       W1       S3562 <t< th=""><th></th><th>DeForest</th><th>WI</th><th>53532</th><th>Amount of Each Receipt this Period</th></t<>		DeForest	WI	53532	Amount of Each Receipt this Period
Coupanning       Coupanning         Primary       General         Primary       General         Aggregate Year-to-Date       Image: State         Full Name (Last, First, Middle Initial)       Date of Receipt         City       State       Zip Code         Middleton       WI       53562         FC ID number of contributing federal political committee.       C         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation SVP, Legal       S25/biweekly         Receipt For:       General       Aggregate Year-to-Date       V         Primary       General       Aggregate Year-to-Date       S25/biweekly         Ctity       State       Zip Code       Amount of Each Receipt         Name of Employer CUNA Mutual Insurance Soc- iety       Other (specify) ▼       420.00       S25/biweekly         C.       Full Name (Last, First, Middle Initial)       General       Date of Receipt         City       State       Zip Code       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       Aggregate Year-to-Date       So 0', Y 2 Y Y         Mailing Address       4889 Champions Run       State       Zip Code       Amount of Each Receipt this Period         FEC ID number of			С		
Primary       General         Other (specify) ♥       Image: Specify Image: Spec		Name of Employer CUNA Mutual Group	· · ·	on	\$25/DIWEEKIY
Other (specify) ▼       300.00         B.       Full Name (Last, First, Middle Initial)         Faye Patzner       Date of Receipt         Mailing Address       4473 Shooting Star Avenue         City       State       Zip Code         Middleton       W1       53562         FEC ID number of contributing federal political committee.       Occupation         SVP, Legal       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       State         C.       Gerald Pavelich         Mailing Address       4889 Champions Run         City       State         Middleton       W1         FEC ID number of contributing federal political committee.       Occupation         City       State       Zip Code         Middleton       W1       53562         FEC ID number of contributing federal political committee.       Occupation         City       State       Zip Code		Receipt For:	Aggregat	e Year-to-Date 🔻	
B.       Faye Patzner       Date of Receipt         Mailing Address       4473 Shooting Star Avenue			0 0	300.00	
City       State       Zip Code         Middleton       WI       53562         FEC ID number of contributing federal political committee.       C       420.00         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation SVP, Legal       30       2.01.1         Receipt For:       Occupation SVP, Legal       420.00       \$25/biweekly         C.       General Other (specify) ▼       Aggregate Year-to-Date ▼       06       30       2.01.1         Mailing Address       4889 Champions Run       420.00       \$25/biweekly       \$25/biweekly         C.       General Other (specify) ▼       State       Zip Code       Middleton ID: SA11AI.5637         Middleton       WI       53562       FEC ID number of contributing federal political committee.       0         FEC ID number of contributing federal political committee.       C       General C       0       0       30       2.01.1         Transaction ID: SA11AI.5537       Middleton       WI       53562       FEC ID number of contributing federal political committee.       600.00       \$50/biweekly         Name of Employer CUNA Mutual Insurance Soc- iety       Aggregate Year-to-Date ▼       600.00       \$50/biweekly         Primary       General       600.00       600.00       \$20/biweekly	- В.		I		Date of Receipt
Middleton       WI       53562       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       420.00         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation SVP, Legal       \$25/biweekly         Receipt For: Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         C.       Geraid Pavelich       Date of Receipt         Mailing Address       4889 Champions Run       0 6         City       State       Zip Code         Middleton       WI       53562         FEC ID number of contributing federal political committee.       C         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation EVP       State       Zip Code         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation EVP       Stol       Stol/biweekly         Primary       General       Occupation EVP       Aggregate Year-to-Date ▼       \$50/biweekly		Mailing Address 4473 Shooting Star Av	enue		
FEC ID number of contributing federal political committee.       C       420.00         Name of Employer CUNA Mutual Insurance Soc-idty       Occupation SVP, Legal       \$25/biweekly         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt         Other (specify) ▼       Date of Receipt       0 for (specify) 1         C.       Full Name (Last, First, Middle Initial) Geratd Pavelich       Date of Receipt         Mailing Address 4889 Champions Run       0 for (specify) 2 0 1 1       Transaction ID: SA11AI.5637         Middleton       WI 53562       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation EVP       600.00         Name of Employer Clina Mutual Insurance Soc-igity       Aggregate Year-to-Date ▼       600.00         WI Mutual Insurance Soc-igity       Aggregate Year-to-Date ▼       1220.00		City	State	Zip Code	Transaction ID: SA11AI.5636
federal political committee. <ul> <li></li></ul>		Middleton	WI	53562	Amount of Each Receipt this Period
Name of Employer (by Mutual linsurance Soc- iety       Occupation SVP, Legal         Aggregate Year-to-Date       ✓         Aggregate Year-to-Date       ✓         C.       Full Name (Last, First, Middle Initial) Geraid Pavelich       Date of Receipt         Mailing Address       4889 Champions Run       ✓         City       State       Zip Code         Middleton       WI       53562         FEC ID number of contributing federal political committee.       C       Occupation EVP         Name of Employer CUNA Mutual linsurance Soc- iety       Occupation EVP       Stote       Stote         Primary       General Other (specify) ♥       Occupation EVP       600.00       \$50/biweekly			С		
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       420.00         C.       Gerald Pavelich         Mailing Address       4889 Champions Run         City       State         City       State         Middleton       WI         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         CUNA Mutual Insurance Society       Occupation         EVP       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼					\$25/biweekiy
Other (specify) ▼       420.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Gerald Pavelich       0 6         Mailing Address 4889 Champions Run       0 6         City       State Zip Code         Middleton       W1 53562         FEC ID number of contributing federal political committee.       C         Name of Employer CUNA Mutual Insurance Society       Occupation EVP         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       1320 00			Aggregat	e Year-to-Date 🔻	
C.       Gerald Pavelich       Date of Receipt         Mailing Address       4889 Champions Run       0 6       3 0       2 0 1 1         City       State       Zip Code       Transaction ID: SA11AI.5637         Middleton       WI       53562       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       600.00         Name of Employer       Occupation       EVP         Receipt For:       Aggregate Year-to-Date       \$50/biweekly         Primary       General       600.00         Other (specify) ▼       1320.00			0 0	420.00	
Mailing Address       4889 Champions Run         City       State       Zip Code         Middleton       WI       53562         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer CUNA Mutual Insurance Society       Occupation EVP       600.00         Receipt For:       Aggregate Year-to-Date ▼       600.00         Primary       General       600.00	– C.		I		Date of Receipt
Middleton       WI       53562       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       600.00         Name of Employer CUNA Mutual Insurance Society       Occupation EVP       50/biweekly         Receipt For:       Aggregate Year-to-Date ▼       \$50/biweekly         Primary       General       600.00         Other (specify) ▼       600.00       1320.00	-				M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.       C       600.00         Name of Employer CUNA Mutual Insurance Society       Occupation EVP       \$50/biweekly         Receipt For:       Aggregate Year-to-Date ▼       \$50/biweekly         Primary       General       600.00         Other (specify) ▼       600.00       1320.00		City	State	Zip Code	Transaction ID: SA11AI.5637
federal political committee.       C       600.00         Name of Employer CUNA Mutual Insurance Soc- iety       Occupation EVP       \$50/biweekly         Receipt For:       Aggregate Year-to-Date ▼       600.00         Primary       General       600.00         Other (specify) ▼       1320.00		Middleton	WI	53562	Amount of Each Receipt this Period
Name of Employer     Occupation       CUNA Mutual Insurance Soc- iety     EVP       Receipt For:     Aggregate Year-to-Date ▼       Other (specify) ▼     600.00			C		
Receipt For: Primary General Other (specify) ♥ Aggregate Year-to-Date ♥ 600.00 1320.00		iety		on	\$50/biweekly
Other (specify) ▼ 600.00		Receipt For:	Aggregat	e Year-to-Date 🔻	
SUBTOTAL of Receipts This Page (optional)				600.00	
	Γ	SUBTOTAL of Receipts This Page (optional)			1320.00
TOTAL This Period (last page this line number only)	F				

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14/26
			for each category of the	(check only one)
			Detailed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscillations oscillations from such committee.
	NAME OF COMMITTEE (In Full)			
	CUNA Mutual Insurance Society Politi	cal Action C	ommittee (CUNA Mutual PA	(C)
Α.	Full Name (Last, First, Middle Initial) Jeffrey A Peterson			Date of Receipt
	Mailing Address 1403 Tierney Drive			$ \begin{array}{c c} M & M \\ 0 & 6 \end{array} \left( \begin{array}{c} D & D \\ 3 & 0 \end{array} \right) \left( \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \right) $
	City	State	Zip Code	Transaction ID: SA11AI.5638
	Waunakee	WI	53597	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer CUNA Mutual Group	Occupation Director	n	\$20/biweekly
	Receipt For:	1	Year-to-Date V	-
	Primary General		240.00	1
	Other (specify)	0.0	240.00	
- В.	Full Name (Last, First, Middle Initial) Jeff H. Post			Date of Receipt
	Mailing Address 2933 Windswept Way			M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: SA11AI.5684
	Verona	WI	53593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer CUNA Mutual Insurance Soc-	Occupation	n t and CEO	- Check
	iety Receipt For:	1	Year-to-Date V	
	Primary General	Aggregate		1
	Other (specify)	0 0	2000.00	
- C.	Full Name (Last, First, Middle Initial) James M. Power	I		Date of Receipt
	Mailing Address 9810 Red Sky Drive			M M / D D / Y Y Y Y 06 30 2011
	City	State	Zip Code	Transaction ID: SA11AI.5642
	Middleton	WI	53562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		480.00
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation SVP, Sal		\$40/biweekly
	Receipt For:	· · · · · · · · · · · · · · · · · ·	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	480.00	]
ſ		1		2720.00
Ļ	SUBTOTAL of Receipts This Page (optional)		•••••••	
	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 15/26           (check only one)         11a           X         11a           13         14           15         16
	Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Political A	e and address of any political committee to s	olicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Jon Prescott Mailing Address 250 NE 30 Road	·	Date of Receipt
	,	State Zip Code	0 4 0 6 2 0 1 1 Transaction ID: SA11AI.5692
	Great Bend	KS 67530	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		400.00
	CPI Qualified Plan Consul-	ccupation hief Marketing Officer	Check
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate Year-to-Date ▼ 400.00	
B.	Full Name (Last, First, Middle Initial) Christopher P. Roe		Date of Receipt
	Mailing Address 2 Hawk Feather Cir		$\begin{array}{c c} M & M \\ \hline 0 & 6 \end{array} \begin{array}{c} D & D \\ \hline 3 & 0 \end{array} \begin{array}{c} Y & Y & Y & Y \\ \hline 2 & 0 & 1 & 1 \end{array}$
	,	State Zip Code	Transaction ID: SA11AI.5643
	Madison	WI 53717	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		600.00
	CUNA Mutual Insurance Soc-	ccupation P, Special Projects	\$50/biweekly
		ggregate Year-to-Date 🔻	
	Primary   General     Other (specify) ▼	600.00	
с.	Full Name (Last, First, Middle Initial) Alastair C. Shore		Date of Receipt
	Mailing Address 9125 Aspen Grove Lane		0 6 / 0 0 / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	-	State Zip Code	Transaction ID: SA11AI.5649
		WI 53717	Amount of Each Receipt this Period
			480.00 \$40/biweekly
	CUNA Mutual Insurance Soc-	ccupation hief Underwriter	
	Receipt For: Primary General Other (specify) ▼	ggregate Year-to-Date ▼ 480.00	
	SUBTOTAL of Receipts This Page (optional)		1480.00
	TOTAL This Period (last page this line number only)		

6				FOR LINE NUMBER: PAGE 16/26
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ľ	<b>FEMIZED RECEIPTS</b>		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Gammary Fage	
A C	ny information copied from such Reports and r for commercial purposes, other than using th	Statements mane and ac	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	angle CUNA Mutual Insurance Society Poli	itical Action C	Committee (CUNA Mutual	PAC)
۸.	Full Name (Last, First, Middle Initial) Leslie Svoboda			Date of Receipt
	Mailing Address 913 Winding Way			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: SA11AI.5650
	Middleton	WI	53562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer CUNA Mutual Group	Occupatio VP	on	\$25/biweekly
	Receipt For:		te Year-to-Date 🔻	
	Primary General	, iggi ogai		
	Other (specify)	0 0	300.00	
	Full Name (Last, First, Middle Initial) David L. Sweitzer	·		Date of Receipt
	Mailing Address 4209 Waban Hill			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: SA11AI.5651
	Madison	WI	53711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupation VP, Sele	on ect Sales	\$25/biweekly
	Receipt For:	Aggregat	te Year-to-Date 🔻	
	Primary General Other (specify) ▼		300.00	
_	Full Name (Last, First, Middle Initial) Delania K. Truly			Date of Receipt
•	Mailing Address 521 Sunset Dr.			0 6 3 0 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.5652
	Hurst	ТХ	76054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupatio VP, Sou	<sup>on</sup> Ith Region	\$50/biweekly
	Receipt For:	Aggregat	te Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	600.00	
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SCH	IEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 26 (check only one)
ITEN	<b>AIZED RECEIPTS</b>		for each category of the	X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any in or for	formation copied from such Reports and Sta commercial purposes, other than using the r	atements may name and add	↓ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	ME OF COMMITTEE (In Full)			
CI	JNA Mutual Insurance Society Politic	al Action C	ommittee (CUNA Mutual PA	C)
	ll Name (Last, First, Middle Initial) bert N. Trunzo			Date of Receipt
	iling Address 1044 Willow Drive			0 6 / 0 0 / Y Y Y Y 0 1 1
Cit	-	State	Zip Code	Transaction ID: SA11AI.5653
<u>D</u> €	elafield	WI	53018	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		1000.08
Na CL ietv	me of Employer JNA Mutual Insurance Soc-	Occupation	n hief Sales Officer	\$83.34/biweekly
	ceipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General	00 - 0		1
	Other (specify)	0 0	1000.08	
	II Name (Last, First, Middle Initial) rk T. Warshauer			Date of Receipt
Ma	iling Address 6333 Stonefield Road			M M         /         D D         Y         Y Y         Y </th
Cit	у	State	Zip Code	Transaction ID: SA11AI.5655
Mi	ddleton	WI	53562	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		300.00
Na CL ietv	me of Employer JNA Mutual Insurance Soc-	Occupation	n et Management	— \$25/biweekly
	ceipt For:	· · ·	e Year-to-Date 🔻	
	Primary General			1
	Other (specify)	0 0	300.00	
	II Name (Last, First, Middle Initial) omas Webber			Date of Receipt
Ma	iling Address 601 Ondossagon Way			M M / D D / Y Y Y Y 06 30 2011
Cit	у	State	Zip Code	Transaction ID: SA11AI.5656
<u>Ma</u>	adison	WI	53719	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		480.00
Na Cl	me of Employer JNA Mutual Group	Occupation Director	n	\$40/biweekly
Re	ceipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) <b>v</b>	0 0	480.00	]
CUP	FOTAL of Descripto This Dags (optional)			1780.08
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тот	AL This Period (last page this line number o	only)		16905.08

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 18 / 26         (check only one)       11a         11a       11b       11c       12         13       14       15       X       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Politic	cal Action C	ommittee (CUNA Mutual PA	C)
Α.	Full Name (Last, First, Middle Initial) <u>CUNA Mutual Insurance Society Political Action C</u> Mailing Address 5910 Mineral Point Rd,	```	,	Date of Receipt 0 2 2 1 2 0 1 1
	<u>Mail Stop 5910 4 A2</u> City Madison	State WI	Zip Code 53701-0747	Transaction ID: SA16.5511 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> coo	)402107	250.00
	Name of Employer	Occupatio	n	Refund from Moore for Con- gress
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	►			 250.0	0
TOTAL This Period (last page this line number only)	►			 250.0	0

BACHUS FOR CONGRESS COMMITTEE       Date of Disbursement         Mailing Address       P.O. BOX 131134         City       State       Zip Code         BIRMINGHAM       AL       35213         Purpose of Disbursement       Category/         Contribution       Category/         Candidate Name       Senate       Disbursement For:         Senate       Disbursement For:       Category/         Office Sought:       X House       Disbursement For:         State: AL       District: 06       Transaction         Full Name (Last, First, Middle Initial)       Disbursement For:       Category/         Mailing Address       972 W WHITMIRE DRIVE       Amount of Ex         City       State       Zip Code         MELBOURNE       FL       32935         Purpose of Disbursement       Category/         Contribution       Category/         Category/       Type         Office Sought:       House       Disbursement For:         X Senate       President       Category/         President       Disbursement For:       Category/         Category/       Type       Category/         Office Sought:       House       Disbursement For:	PAGE 19/26								
Full Name (Last, First, Middle Initial)       Transaction         BACHUS FOR CONGRESS COMMITTEE       Date of Disbursement         Mailing Address       P.O. BOX 131134         City       State       Zip Code         BIRMINGHAM       AL       35213         Purpose of Disbursement       Candidate Name       Category/ Type         Contribution       Category/ President       Category/ President       Category/ Type         Office Sought:       X House       Disbursement For: Disbursement For: President       General         State: AL       District: 06       Transaction         Full Name (Last, First, Middle Initia)       BILL NELSON FOR U S SENATE       Transaction         Mailing Address       972 W WHITMIRE DRIVE       Ø <sup>*</sup> 5 <sup>M</sup> / [         City       State       Zip Code       Amount of Ei         Mailing Address       972 W WHITMIRE DRIVE       Category/ Type       [         Office Sought:       House       Disbursement For: Disbursement For:       [       Amount of Ei         Outher (specify) ▼       Senate       President       [       Amount of Ei         City       Senate       Disbursement For:       [       Cher (specify) ▼         Office Sought:       House       Disbursement For:       [ </td <td></td>									
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BIRMINGHAM       AL       35213         Purpose of Disbursement       Cantegory/         Candidate Name       SPENCER T. BACHUS         Office Sought:       X       House         Disbursement For:       X       Primary         Category/       Type         Office Sought:       X       House         President       Disbursement For:       Category/         State:       AL       District: 06       Transaction         Full Name (Last, First, Middle Initial)       BILL NELSON FOR U S SENATE       Transaction         Mailing Address       972 W WHITMIRE DRIVE       Mate of Disbursement         City       State       Zip Code       Amount of Ei         MELBOURNE       FL       32935       Amount of Ei         Purpose of Disbursement       Contribution       Category/       Type         Office Sought:       Yesenate       Disbursement For:       Category/         State: FL       District: 00       Transaction       Date of Disbursement         Full Name (Last, First, Middle Initial)       BOBBY SCHILLING FOR CONGRESS       Transaction         Mailing Address       367 AVENUE OF THE CITIES SUITE D       Mae of Disbursement         City       State       Zip Code									
Contribution       Category/ Type         Category/ SPENCER T. BACHUS       Category/ Type         Office Sought:       X House Senate       Disbursement For: X Primary       General Other (specify)         State: AL       District: 06       X         Full Name (Last, First, Middle Initial)       Transaction Date of Disbursement Contribution       Transaction Date of Disbursement Category/ Y         City       State       Zip Code FL       Amount of Exit State:         Mailing Address       972 W WHITMIRE DRIVE       Amount of Exit State:         City       State       Zip Code FL       Amount of Exit State:         Mailing Address       972 W WHITMIRE DRIVE       Category/ Type       Amount of Exit State:         Office Sought:       House Y Senate       Disbursement For: X Senate       Category/ Type         Office Sought:       House Y Senate       Disbursement For: X Senate       Category/ Type         Full Name (Last, First, Middle Initial) BOBBY SCHILLING FOR CONGRESS       Transaction Date of Disbursement Contribution       Amount of Exit Senate         City       State       Zip Code LAST MOLINE       Amount of Exit Senate       Amount of Exit Y Primary         Category/ ROBERT T MR. SCHILLING       Disbursement For: X Primary       Category/ Type       Amount of Exit Y Primary         Office Sought:	ach Disbursement this Period								
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Purpose of Disbursement       Category/ Type         Candidate Name BILL NELSON       Disbursement For: X Senate       Category/ Type         Office Sought:       House President       Disbursement For: X Senate       Transaction         State: FL       District: 00       Transaction         Full Name (Last, First, Middle Initial)       BOBBY SCHILLING FOR CONGRESS       Transaction         Mailing Address       367 AVENUE OF THE CITIES SUITE D       Disbursement         City       State       Zip Code         EAST MOLINE       IL       61244         Purpose of Disbursement       Category/ Type       Category/ Type         Office Sought:       X       House         Disbursement For:       Category/ Type       Category/ Type         Office Sought:       X       House         Disbursement For:       Senate       Disbursement For:         Office Sought:       X       House       Disbursement For:         Office Sought:       X       House       Disbursement For:         Y Primary       General       Other (specify)       V	ach Disbursement this Period								
BILL NELSON       Type         Office Sought:       House       Disbursement For:         X       Senate       Primary       General         President       Other (specify)       Image: 1 general       Image: 2 general         State: FL       District: 00       Image: 2 general       Image: 2 general         Full Name (Last, First, Middle Initial)       BOBBY SCHILLING FOR CONGRESS       Image: 2 general       Image: 2 general         Mailing Address       367 AVENUE OF THE CITIES SUITE D       Image: 2 general       Image: 2 general       Image: 2 general         City       State       Zip Code       Amount of Ea       Image: 2 general       Image: 2 general         City       State       Zip Code       Amount of Ea       Image: 2 general       Image: 2 general         City       State       Zip Code       Amount of Ea       Image: 2 general       Image: 2 general         City       State       Zip Code       Image: 2 general       Image: 2 general       Image: 2 general         City       State       Senate       Image: 2 general       Image: 2 gene: 2 general	1000.00								
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Mailing Address       367 AVENUE OF THE CITIES SUITE D       0 6         City       State       Zip Code         EAST MOLINE       IL       61244         Purpose of Disbursement       Category/         Candidate Name       Category/         ROBERT T MR. SCHILLING       Category/         Office Sought:       X         House       Disbursement For:         Senate       X         President       Other (specify)									
EAST MOLINE     IL     61244       Purpose of Disbursement Contribution     Category/ Type       Candidate Name ROBERT T MR. SCHILLING     Category/ Type       Office Sought:     X       House     Disbursement For:       Senate     X       Primary     General       President     Other (specify)	<sup>D</sup> 16 / <sup>Y</sup> 2011								
Contribution     Category/ Type       Candidate Name ROBERT T MR. SCHILLING     Category/ Type       Office Sought:     X       Y     House       Disbursement For:     Senate       Y     Primary       Other (specify)     ▼	ach Disbursement this Period								
ROBERT T MR. SCHILLING     Type       Office Sought:     X     House     Disbursement For:       Senate     X     Primary     General       President     Other (specify)     ▼	500.00								
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SCHEDULE B (FEC Form 3	<ul> <li>Use separate schedule(s</li> </ul>	;)		R LINE		R:			Р	AGE	20 /	26	
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NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society F	Political Action Committee (CUN	A Mu	itua	I PAC)									
Full Name (Last, First, Middle Initial) DUFFY FOR CONGRESS					Date		isburs	ser			-	Y	1
Mailing Address PO BOX 538					0 2			0	7	2	žoł	1	
City WAUSAU	State Zip Code WI 54402				Amou	unt o	fEac	h [	Disburs			-	riod
Purpose of Disbursement Contribution			v		L.					25	500.0	0	
Candidate Name SEAN DUFFY			ateg Type	-									
Office Sought: X House Senate President	Disbursement For: X Primary General Other (specify) ▼												
State: WI District: 07													
Full Name (Last, First, Middle Initial) ED ROYCE FOR CONGRESS					Date		isburs	ser		.55	59		
Mailing Address P.O. BOX 2525	Mailing Address P.O. BOX 2525							23	<sup>D</sup> 3	Y 2	žo i	1 <sup>Y</sup>	
City ORANGE	City State Zip Code ORANGE CA 92859							h [	Disburs	emei	nt this	Pe	riod
Purpose of Disbursement Contribution			į.	-						1(	000.0	0	
Candidate Name ED MR ROYCE			ateg Type	-									
Office Sought: X House Senate President State: CA District: 40	Disbursement For: X Primary General Other (specify) ▼	Į	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
Full Name (Last, First, Middle Initial) FRESHMAN AGRICULTURAL RE	PUBLICAN MEMBERS TRUST	AKA	FA	RM	Date		isburs	ser					
Mailing Address 7315 WISCONS	SIN AVE SUITE 310 EAST				0 <sup>M</sup> 3	M	/ D	1 (	Ŏ	1 2	žo i	1	
City BETHESDA	State Zip Code MD 20814				Amou	unt o	fEac	h [	Disburs	emei	nt this	Pe	riod
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F	NAME OF COMMITTEE (In Full)		501		00 10 00			5.10 11	5 50						
$\langle$	CUNA Mutual Insurance Society Political A	ction Committee (CUNA	Μι	utua	I PAC)										
	Full Name (Last, First, Middle Initial) FRESHMAN AGRICULTURAL REPUBLIC, TRUST	AN MEMBERS TRUST A	١KA	FA	RM										
	Mailing Address 7315 WISCONSIN AVE	SUITE 310 EAST				$\begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \\ \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} \end{array} \\ \begin{array}{c} \end{array} \\ \end{array} \\ \begin{array}{c} \end{array} \\ \end{array} \\ \begin{array}{c} \end{array} \\ \begin{array}{c} \end{array} \\ \end{array} \\ \begin{array}{c} \end{array} \\ \begin{array}{c} \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} \end{array} \\ \end{array} $									
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	Candidate Name TIMOTHY A HUELSKAMP			ateg Typ											
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	State: KS District: 01														
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	,	State Zip Code NY 10165				Amount of Each Disbursement this									
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	Full Name (Last, First, Middle Initial)           JIM HIMES FOR CONGRESS								: SB ement	23.5	553	3			
	Mailing Address 857 POST ROAD, #312					0 <sup>M</sup> 5	М	<b>1</b>	D /	Y	ž	0 1 1	Y		
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ITEMIZED DISBURSEMENTS       for each category of Detailed Summary         Any Information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any point of Commercial purposes, other than using the name and address of any point of COMMITTEE (In Full)         CUNA Mutual Insurance Society Political Action Committee (In Full Name (Last, First, Middle Initial)         KEVIN MCCARTHY FOR CONGRESS         Mailing Address       PO BOX 12667         City       State       Zip Cod         BAKERSFIELD       CA       93389         Purpose of Disbursement       Contribution       Candidate Name         KEVIN MCCARTHY       Disbursement For:       Senate         Office Sought:       X       House       Disbursement For:         Senate       President       Other (specify)       ▼         State:       CA       District: 22       Full Name (Last, First, Middle Initial)         KIND FOR CONGRESS COMMITTEE       Mailing Address       205 5TH AVENUE SOUTH	d or used by any p political committed (CUNA Mutual	I PAC)	purpose ntribution	ons fro on ID: sburse	om such : SB2 ement	contril h comr	mittee							
or for commercial purposes, other than using the name and address of any p NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Political Action Committee ( Full Name (Last, First, Middle Initial) KEVIN MCCARTHY FOR CONGRESS Mailing Address PO BOX 12667 City State Zip Cod BAKERSFIELD CA 93389 Purpose of Disbursement Contribution Candidate Name KEVIN MCCARTHY Office Sought: X House Disbursement For: Senate President State: CA District: 22 Full Name (Last, First, Middle Initial) KIND FOR CONGRESS COMMITTEE	cuna Mutual	I PAC)	<b>nsactio</b> e of Dis $5^{M}$	ons fro on ID: sburse	om such : SB2 ement	h comr	mittee							
NAME OF COMMITTEE (In Full)         CUNA Mutual Insurance Society Political Action Committee (         Full Name (Last, First, Middle Initial)         KEVIN MCCARTHY FOR CONGRESS         Mailing Address       PO BOX 12667         City       State       Zip Cod         BAKERSFIELD       CA       93389         Purpose of Disbursement       CA       93389         Contribution       Candidate Name       Exercise CA         Contribution       Senate       Disbursement For:         Senate       President       Other (specify)         State: CA       District: 22       Full Name (Last, First, Middle Initial)         KIND FOR CONGRESS COMMITTEE       Full Name (Last, First, Middle Initial)	(CUNA Mutual	I PAC)	nsactio e of Dis 5	on ID: sburse	: SB2 ement									
Full Name (Last, First, Middle Initial)         KEVIN MCCARTHY FOR CONGRESS         Mailing Address       PO BOX 12667         City       State       Zip Cod         BAKERSFIELD       CA       93389         Purpose of Disbursement       Contribution         Candidate Name       KEVIN MCCARTHY         Office Sought:       X       House         President       Disbursement For:         State:       CA       Disbursement For:         State:       CA       Disbursement For:         Full Name (Last, First, Middle Initial)       The condition         KIND FOR CONGRESS COMMITTEE       Full Name (Last, First, Middle Initial)	de 9 Catego	Trar Date	e of Dis 5 <sup>M</sup> /	sburse	ement	3.554	17							
KEVIN MCCARTHY FOR CONGRESS         Mailing Address       PO BOX 12667         City       State       Zip Cod         BAKERSFIELD       CA       93389         Purpose of Disbursement       CA       93389         Contribution       Candidate Name       KEVIN MCCARTHY         Office Sought:       X       House       Disbursement For:         Senate       President       Other (specify)       ✓         State:       CA       District: 22       College         Full Name (Last, First, Middle Initial)       KIND FOR CONGRESS COMMITTEE	) Catego	Date	e of Dis 5 <sup>M</sup> /	sburse	ement	3.554	<u>ا</u> 7							
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Mailing Address PO BOX 1135		0 <sup>M</sup> e	б <sup>м</sup> /	۵	27	Y Y 2	2011	Y						
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Full Name (Last, First, Middle Initial) MOORE FOR CONGRESS						Transaction ID: SB23.5527 Date of Disbursement										
Mailing Address PO BOX 16646																
MÍLWAUKEE		Zip Code 53216				Amou	unt of	f Each	ı Dist	ourser	-					
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Full Name (Last, First, Middle Initial) SCOTT GARRETT FOR CONGRESS						Date	of Di	isburs	sem				
Mailing Address P.O. BOX 905									Y				
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	Detailed Summary Page	21b 27	22         X         23         24         25           28a         28b         28c         29				
ny Information copied from such Reports and State r for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)							
Full Name (Last, First, Middle Initial) TAMMY BALDWIN FOR CONGRESS		Transaction ID: SB23.5515 Date of Disbursement					
Mailing Address P.O. BOX 696		$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{pmatrix} D & D \\ 0 & 1 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 1 \end{bmatrix} $					
City MADISON	StateZip CodeWI53701		Amount of Each Disbursement this Period				
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Candidate Name TAMMY BALDWIN		Category/ Type					
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Full Name (Last, First, Middle Initial)			<b>T ID</b> OD00 5550				
TAMMY BALDWIN FOR CONGRESS			Transaction ID: SB23.5556 Date of Disbursement				
Mailing Address P.O. BOX 696		$ \begin{array}{c} \begin{array}{c} M \\ 0 \\ 5 \\ \end{array} \end{array} \right) \left( \begin{array}{c} D \\ 1 \\ 0 \\ \end{array} \right) \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \\ \end{array} \right) \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \\ \end{array} \right) \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \\ \end{array} \right) \right) \left( \begin{array}{c} Y \\ Y $					
City MADISON	StateZip CodeWI53701		Amount of Each Disbursement this Period				
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Candidate Name TAMMY BALDWIN		Category/ Type					
Office Sought: X House Disburs Senate President State: WI District: 02	ement For: Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial) THORNBERRY FOR CONGRESS COMM	<i>I</i> ITTEE		Transaction ID: SB23.5539 Date of Disbursement				
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	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NU (check only of 21b 27	ne) 22 X 23 24 25 26 28a 28b 28c 29 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)           CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)						
Α.	Full Name (Last, First, Middle Initial) UDALL FOR COLORADO Mailing Address PO BOX 40158	UDALL FOR COLORADO Mailing Address PO BOX 40158					
		State Zip Code CO 80204	Category/ Type	Amount of Each Disbursement this Period 1000.00			
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