08/19/2010 19:53

Image# 10931148417

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| | | or Otner | Inan An A | utnorize | ea Comm | Ittee | | Office U | se Only | |
|-----|---|------------------------|--|--|--------------------------------|-------------------------------------|------------|--------------------------------------|--------------------|---|
| 1. | | USE FEC M OR TYPE O | IAILING LABE PR PRINT ₩ | | xample:If typ ver the lines | ing, type | | | | |
| | Property Casualty Insurers As | sociation of | America Politic | | | 5 . | | | | |
| | | | | | | | 1 1 1 | | | |
| AD | DRESS (number and street) | 2600 Sou | uth River Road | | | | | 1 1 1 1 | | |
| | Check if different than previously reported. (ACC) | Des Plair | nes | | | | LIL | <u> </u> | 80018 _ _ | 3286 |
| 2. | FEC IDENTIFICATION NUM | BER ₩ | (| CITY 🛕 | | | STATE | 4 | ZIPCOD | E 🛋 |
| | C00066472 | | 3. | IS THIS REPOR | т | NEW (N) OR | X | AMENDED (A) | | |
| 4. | TYPE OF REPORT (Choose One) (a) Quarterly Reports: | (b) Mor Rep Due | oort F | Feb 20 (M2 Mar 20 (M3 Apr 20 (M4 | 3) | May 20 (M5) Jun 20 (M6) Jul 20 (M7) | | Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) | | Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) |
| | April 15 Quarterly Report(Q1 July 15 Quarterly Report(Q2 October 15 Quarterly Report(Q3 | (c) | 12-Day PRE-Election Report for the | | Primary (1 Conventio | 2P) | = | neral (12G) ecial (12S) | | Runoff (12R) |
| | January 31 Quarterly Report(YE | | Ele | ction on | | | | | in the State of | |
| | July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER) | (d) | 30-Day Post -Election Report for the: | | General (3 | 30G) | Ru | noff (30R) | in the State of | Special (30S) |
| 5. | Covering Period 0 4 | 01 | 2010 | | through | h 04 | 3 0 | 2010 | | |
| | ertify that I have examined this R | Report and to June Ho | • | knowledge | e and belief it | t is true, correc | t and com | plete. | | |
| Sig | nature of Treasurer Electron | ically Filed b | y June Holm | es | | | Date | 08 1 | 9 | 2010 |
| NO | TE : Submission of false, erron | eous, or inco | omplete informa | ition may s | subject the pe | erson signing tl | nis Report | to the penalties | of 2 U.S | s.C 437g. |
| | Office Use | | | | | | | ı | FORI | |

FE6AN026

 $\textbf{A.} \quad \text{Form/Schedule}: \quad \textbf{F3XA}$

Amendment to 5/20 monthly (FEC filing ID 470214. To correct cash at beginning of period and receipts reported.

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3 / 54

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

D D [®]D 0 1 0 4 2010 0 4 3 0 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date Cash on Hand (a) 2010° 162108.60 January 1 (b) Cash on Hand at 195599.90 Begining of Reporting Period 61443.61 232564.91 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 257043.51 394673.51 6(a) and 6(c) for Column B) 159830.00 22200.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 234843.51 234843.51 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 54

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period:

From:

D D 0 1

Y Y W Y 2 0 1 0

то.

м м 0 4 ^D 3 0

Y Y Y Y 2 0 1 0

| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|------|--|-------------------------------|-----------------------------------|
| | Contributions (other than loans) From: a) Individuals/Persons Other | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 45607.35 | 149896.40 |
| | (ii) Unitemized | 8810.59 | |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 54417.94 | 183026.73 |
| (i | b) Political Party Committees | 0.00 | 0.00 |
| , | c) Other Political Committees (such as PACs) | 7000.00 | 45000.00 |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 61417.94 | 228026.73 |
| | ransfers From Affiliated/Other | 0.00 | 0.00 |
| 3. A | All Loans Received | 0.00 | 0.00 |
| | oan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| (0 | Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| to | o Federal candidates and Other Political Committees | 0.00 | 4500.00 |
| | Other Federal Receipts Dividends, Interest, etc.) | 25.67 | 38.18 |
| | ransfers from Non-Federal and Levin Funds | | |
| (8 | a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (l | b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (0 | c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| | otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c)) | 61443.61 | 232564.91 |
| | otal Federal Receipts subtract Line 18(c) from Line 19) | 61443.61 | 232564.91 |

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 54

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| Activity (from Schedule H4) | 0.00 | 0.00 |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share | 0.00 | 0.00 |
| (b) Other Federal Operating | 0.00 | |
| Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 0.00 | 0.00 |
| . Transfers to Affiliated/Other Party | | |
| Committees Contributions to | 0.00 | 0.00 |
| Federal Candidates/Committeesand Other Political Committees | 16000.00 | 150130.00 |
| and Other Political Committees | | |
| (use Schedule E) | 0.00 | 0.00 |
| . Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| (uso soliedule i) | | |
| . Loan Repayments Made | 0.00 | 0.00 |
| . Loans Made | 0.00 | 0.00 |
| . 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 |
| (add Lines 20(a), (b), and (c)) | | |
| . Other Disbursements | 6200.00 | 9700.00 |
| . Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity | | |
| (from Schedule H6) | 0.00 | 0.00 |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely | 0.00 | 0.00 |
| 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)) | 22200.00 | 159830.00 |
| | | |
| 2. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | 22200 00 | 150000 00 |
| from Line 31) | 22200.00 | 159830.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 54

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| Contributions (other than loans) Line 11(d), page 3) | 61417.94 | 228026.73 |
| Contribution Refunds Line 28(d)) | 0.00 | 0.00 |
| Contributions (other than loans) tract Line 34 from Line 33) | 61417.94 | 228026.73 |
| Federal Operating Expenditures Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| ets to Operating Expenditures n Line 15, page 3) | 0.00 | 0.00 |
| Operating Expenditures tract Line 37 from Line 36) | 0.00 | 0.00 |

FE6AN026

В.

C.

| SCHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 7/54 | | | |
|--|------------------------|--|--|--|--|--|
| · | | Use separate schedule(s) | (check only one) | | | |
| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | X 11a 11b 11c 12 | | | |
| | | Detailed Suffillary Fage | $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | | | |
| Any information copied from such Reports and S | tatements may | v not be sold or used by any perso | on for the purpose of soliciting contributions | | | |
| or for commercial purposes, other than using the | name and add | dress of any political committee to | solicit contributions from such committee. | | | |
| NAME OF COMMITTEE (In Full) | | | | | | |
| Property Casualty Insurers Association CIPAC) | n of America | Political Action Committee | (P- | | | |
| Full Name (Last, First, Middle Initial) Mr Christopher J. Colavita | | | Date of Receipt | | | |
| Mailing Address P. O. Box 60069 | | | 0 4 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| City | State | Zip Code | Transaction ID: 31570054 | | | |
| City Of Industry | CA | 91716-0069 | Amount of Each Receipt this Period | | | |
| | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 600.00 | | | |
| Name of Employer NJM Insurance Group | Occupatio Vice Pres | | | | | |
| Receipt For: | Aggregate | Year-to-Date V | | | | |
| Primary General | 7 1991 09410 | | 1 | | | |
| Other (specify) | | 600.00 | | | | |
| | | | 4 | | | |
| Full Name (Last, First, Middle Initial) Dan Bleak | | | Date of Receipt | | | |
| Mailing Address 3410 Mammoth Court | | | M M / D D / Y Y Y Y | | | |
| | | | 04 05 2010 | | | |
| City | State | Zip Code | Transaction ID: 31570075 | | | |
| <u>Laramie</u> | WY | 82072-5091 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing | | | 050.00 | | | |
| federal political committee. | C | | 250.00 | | | |
| | 10 | | | | | |
| Name of Employer Mountain West Farm Bureau | Occupatio | n | | | | |
| Mutual Insur | Director | | | | | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | | | | |
| Primary General | ' ' | 250.00 | | | | |
| Other (specify) | 0 0 | | | | | |
| | | | | | | |
| Full Name (Last, First, Middle Initial) Mr. John E. Dougherty | | | Date of Receipt | | | |
| Mailing Address 1940 Custer | | | M M / D D / Y Y Y Y | | | |
| Maining Address 1940 Odstel | | | 04 05 2010 | | | |
| City | State | Zip Code | Transaction ID: 31570076 | | | |
| Laramie | WY | 82070-4313 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing | | | | | | |
| federal political committee. | C | | 250.00 | | | |
| | | | | | | |
| Name of Employer Mountain West Farm Bureau | Occupatio | | | | | |
| Mutual Insur | | sident Operations | | | | |
| Receipt For: | Aggregate | Year-to-Date V | | | | |
| Primary General | | 250.00 | 1 | | | |
| Other (specify) | | 230.00 |] | | | |
| | | | | | | |
| | | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 1100.00 | | | |
| | | <u>*</u> | _ | | | |

TOTAL This Period (last page this line number only)

| SCHEDULI ITEMIZED | E A (FEC Form 3X) RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|--|-------------------------------|---|--|
| or for commercia | copied from such Reports and I purposes, other than using the DMMITTEE (In Full) | Statements magne name and add | y not be sold or used by any pers dress of any political committee t | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| Property Ca | asualty Insurers Associati | on of America | a Political Action Committee | P (P- |
| Mr. Jim Geese | • | | | Date of Receipt |
| | ess 2419 Dover Drive | | | 04 / 05 / 2010 |
| City Laramie | | State WY | Zip Code 82072-5300 | Transaction ID: 31570077 |
| | per of contributing al committee. | C | 82072-5300 | Amount of Each Receipt this Period 250.00 |
| Name of Emp Mountain We Mutual Insur Receipt For: | oloyer st Farm Bureau | - ' | sident Marketing | |
| Primary | General specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| Full Name (La | ast, First, Middle Initial) Kinnon | | | Date of Receipt |
| Mailing Addre | ss 1670 Apache Dr. | | | 04 05 7 2010 |
| City | | State | Zip Code | Transaction ID: 31570078 |
| <u>Laramie</u> | | WY | 82072-6964 | Amount of Each Receipt this Period |
| FEC ID numb federal politica | per of contributing al committee. | C | | 250.00 |
| Mutual Insur | oloyer st Farm Bureau | Occupatio Vice Pres | n sident Corporate Counsel | |
| Receipt For: Primary Other (s | General General | Aggregate | e Year-to-Date ▼ 250.00 | |
| Full Name (La | ast, First, Middle Initial) | | | Date of Receipt |
| Mailing Addre | ss 120 Corthell Road | | | 04 05 2010 |
| City | | State | Zip Code | Transaction ID: 31570079 |
| <u>Laramie</u> | | WY | 82070-4826 | Amount of Each Receipt this Period |
| FEC ID numb federal politica | per of contributing al committee. | C | | 250.00 |
| Mutual Insur | oloyer st Farm Bureau | | ancial Officer | |
| Receipt For: Primary Other (s | General specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| SUBTOTAL of | Receipts This Page (optional) | | | 750.00 |

| | ULE A (FEC Form 3X) ED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 54 (check only one) X |
|-----------------------------|---|------------------------------|---|--|
| or for comm | ation copied from such Reports and nercial purposes, other than using th DF COMMITTEE (In Full) | Statements mane name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| \ | tv Casualtv Insurers Associati | on of America | a Political Action Committee | (P- |
| | ne (Last, First, Middle Initial) ly Romero Address 1730 Person | | | Date of Receipt |
| | 1730 1 613011 | Chaha | 7'o Codo | 04 05 2010 |
| City <u>Larami</u> | e | State WY | Zip Code 82070-5437 | Transaction ID: 31570080 Amount of Each Receipt this Period |
| | number of contributing political committee. | С | | 250.00 |
| Mutual I | | Occupatio Employe | n e Relations Supervisor | |
| | For: imary General her (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| Full Nam | ne (Last, First, Middle Initial) Schmett | | | Date of Receipt |
| Mailing A | Address 1708 W. Person | | | $\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y \\ 0 & 4 & & & 0 & 5 & & & 2 & 0 & 1 & 0 \end{bmatrix}$ |
| City | | State | Zip Code | Transaction ID: 31570086 |
| | e number of contributing solitical committee. | C | 82070-6078 | Amount of Each Receipt this Period 250.00 |
| Mountaii <u>Mutual I</u> | | Occupatio Chief Fir | n nancial Officer | |
| | For: imary General her (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| Full Nam | ne (Last, First, Middle Initial) | | | Date of Receipt |
| Mailing A | Address 2678 Wyoming Ave. | | | 04 05 2010 |
| City | | State | Zip Code | Transaction ID: 31570087 |
| <u>Larami</u> | | WY | 82070-6224 | Amount of Each Receipt this Period |
| | number of contributing political committee. | C | | 250.00 |
| <u>Mutual I</u> | | Occupatio Director | | |
| | For: imary General her (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| SURTOTA | L of Receipts This Page (optional) | | | 750.00 |

| SCHEDULE A (FEC Form ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 54 (check only one) X |
|---|---|---|
| or for commercial purposes, other than us NAME OF COMMITTEE (In Full) Property Casualty Insurers Asso | s and Statements may not be sold or used by any person sing the name and address of any political committee to ociation of America Political Action Committee | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Nigel J. Griffey Mailing Address 19073 Quiver Ri | dge Drive | Date of Receipt |
| City Leesburg FEC ID number of contributing | State Zip Code VA 20176-8447 | Transaction ID: 31570088 Amount of Each Receipt this Period |
| Name of Employer Medmarc Insurance Group | Occupation CFO | 325.00 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |
| Full Name (Last, First, Middle Initial) Ronald J Swanstrom Mailing Address 724 Burgess Hill | Rd | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31570089 |
| <u>Naperville</u> | IL 60565-6103 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 600.00 |
| Name of Employer Argo Group International Holdings, Ltd Receipt For: Primary General Other (specify) ▼ | Occupation Sr VP Chief Reserving Actuary Aggregate Year-to-Date 600.00 | 1 |
| Full Name (Last, First, Middle Initial) Mr. Douglas A. Goldberg | | Date of Receipt |
| Mailing Address 243 Ivring Street | t . | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31570090 |
| San Mateo FEC ID number of contributing federal political committee. | CA 94402-2221 | Amount of Each Receipt this Period 250.00 |
| Name of Employer California Casualty Group | Occupation Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| SUBTOTAL of Receipts This Page (opti | onal) | 1175.00 |

| | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------|---|--------------------------------|---|---|
| | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | Property Casualty Insurers Association CIPAC) | n of America | a Political Action Committee | (P- |
| Α. | Full Name (Last, First, Middle Initial) Craig W Kliethermes | | | Date of Receipt |
| | Mailing Address 11306 N. Pawnee Road | | | 04 01 2010 |
| | City <u>Peoria</u> | State IL | Zip Code | Transaction ID: 31570198 |
| | FEC ID number of contributing federal political committee. | C | 61615 | Amount of Each Receipt this Period 240.00 |
| | Name of Employer RLI | Occupation Sr Vice I | on President Risk Services | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 240.00 | |
| ь. В. | Full Name (Last, First, Middle Initial) Mr. James Wallace | | | Date of Receipt |
| | Mailing Address 6023 N Waterbury Ro | ad | | 0 4 |
| | City | State | Zip Code | Transaction ID: 31570200 |
| | Des Moines | IA | 50312-1343 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 1200.00 |
| | Name of Employer GuideOne Insurance | | t and Chief Executive Office | <u>r</u> |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1200.00 | |
| С. С. | Full Name (Last, First, Middle Initial) Mr. Thomas Konopka | | | Date of Receipt |
| | Mailing Address 4186 Governor Yeard | ley Lane | | M M / D D / Y Y Y Y Y Y O 1 O 1 O 1 O 1 O 1 O 1 O 1 |
| | City | State | Zip Code | Transaction ID: 31570203 |
| | Fairfax | VA | 22030-8115 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 325.00 |
| | Name of Employer Medmarc Insurance Group | , ' | President | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 325.00 | |
| | SUBTOTAL of Receipts This Page (optional) . | | | 1765.00 |
| İ | TOTAL This Period (last page this line number | · only) | • | |

| mmercial purposes, other than using t E OF COMMITTEE (In Full) | State Zip Code NJ 08638-1214 C Occupation Director Medical Services Admir Aggregate Year-to-Date State Zip Code WI 53562-2457 | Date of Receipt M M M |
|--|---|--|
| perty Casualty Insurers Associat AC) Name (Last, First, Middle Initial) on K. Hayman ng Address 7 Blue Ridge Dr. Inton ID number of contributing al political committee. e of Employer Insurance Group intor Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | State Zip Code NJ 08638-1214 C Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | Date of Receipt M M D D D Z D D D D D D |
| Name (Last, First, Middle Initial) on K. Hayman ng Address 7 Blue Ridge Dr. Inton ID number of contributing al political committee. e of Employer Insurance Group int For: Primary General Other (specify) Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | Transaction ID: 31572591 Amount of Each Receipt this Period 250.00 Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| ID number of contributing al political committee. e of Employer Insurance Group ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | 0 4 |
| ID number of contributing al political committee. e of Employer Insurance Group ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel Ing Address 5117 St Cyr Road | Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | Amount of Each Receipt this Period 250.00 nistrati Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| ID number of contributing al political committee. e of Employer Insurance Group ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel Ing Address 5117 St Cyr Road | Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | Date of Receipt 0 4 0 8 2 0 1 0 Transaction ID: 31572593 |
| al political committee. e of Employer Insurance Group ipt For: Primary General Other (specify) Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | Occupation Director Medical Services Admir Aggregate Year-to-Date 250.00 | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| oipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | Director Medical Services Admir Aggregate Year-to-Date ▼ 250.00 State Zip Code | Date of Receipt M M D D D V Y Y Y Y Y Y Y Y Y |
| Primary General Other (specify) ▼ Name (Last, First, Middle Initial) C Salzwedel ng Address 5117 St Cyr Road | 250.00 State Zip Code | Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y |
| C Salzwedel ng Address 5117 St Cyr Road | ' | 0 4 0 8 2 0 1 0 Transaction ID: 31572593 |
| · | ' | 0 4 0 8 2 0 1 0 Transaction ID: 31572593 |
| dleton | ' | |
| dleton | WI 53562-2457 | Amount of Each Receipt this Period |
| | | |
| ID number of contributing al political committee. | C | 1500.00 |
| e of Employer rican Family Insurance p | Occupation President and COO | |
| ipt For: Primary General | Aggregate Year-to-Date ▼ 1500.00 | 10 |
| Other (specify) ▼ | | |
| Name (Last, First, Middle Initial) J Seymour | Date of Receipt | |
| ng Address 696 Acadia Way | | 04 08 7 2010 |
| | • | Transaction ID: 31572594 |
| | VVI 53593-8227 | Amount of Each Receipt this Period |
| al political committee. | C | 600.00 |
| e of Employer rican Family Insurance p | Occupation Vice President - Government Af | ffair & C |
| ipt For: | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 600.00 | 0 |
| | | 2350.00 |
| n la | D Seymour g Address 696 Acadia Way na D number of contributing al political committee. of Employer ican Family Insurance opport For: Primary General Other (specify) | State Zip Code MI 53593-8227 D number of contributing al political committee. of Employer ican Family Insurance opt For: Primary General State Zip Code WI 53593-8227 C Occupation Vice President - Government Af |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 13 / 54 (check only one) X 11a |
|---------|--|--------------------------------|--|---|
| | Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements ma e name and ad | y not be sold or used by any person dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | Property Casualty Insurers Associatio CIPAC) | on of America | a Political Action Committee | (P- |
| A. | Full Name (Last, First, Middle Initial) Ms. Diane E. Griffin Mailing Address 250 Oakham Court | | | Date of Receipt |
| | | | | 04 08 2010 |
| | City | State OH | Zip Code | Transaction ID: 31572610 |
| | Powell FEC ID number of contributing federal political committee. | C | 43065-8903 | Amount of Each Receipt this Period 250.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Director | n MIS Applications | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| - В. | Full Name (Last, First, Middle Initial) Robin K. Madosky | <u> </u> | | Date of Receipt |
| | Mailing Address 1530 S Champion Ave | Э. | | 04 08 2010 |
| | City | State | Zip Code | Transaction ID: 31572611 |
| | Columbus | OH | 43207-1306 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 300.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Manager | | |
| | Receipt For: Primary General Other (specify) ♥ | Aggregate | e Year-to-Date ▼ 300.00 | |
| - C. | Full Name (Last, First, Middle Initial) Ms. Nancy D. Edwards | | | Date of Receipt |
| | Mailing Address 2615 Johnston Road | | | 0 4 0 8 Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 31572613 |
| | Columbus | ОН | 43220-4532 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation VP Spec | ⁿ ial Projects | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 300.00 | |
| | SUBTOTAL of Receipts This Page (optional) | 1 | | 850.00 |
| | TOTAL This Period (last page this line number | | | |

| | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 14 / 54 (check only one) X |
|-----------|---|-------------------------------|---|---|
| , | Any information copied from such Reports and St or for commercial purposes, other than using the | tatements may name and add | not be sold or used by any persol lress of any political committee to | on for the purpose of soliciting contributions a solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America | Political Action Committee | (P- |
| . ∠ \. | Full Name (Last, First, Middle Initial) Craig L. Segbers | | | Date of Receipt |
| | Mailing Address 12293 Mallard Pound C | CT. | | 0 4 0 8 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 31572614 |
| | Pickerington | OH | 43147-8478 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 240.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Systems | | |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 240.00 | |
| _ | Full Name (Last, First, Middle Initial) John M Boschell | | | Date of Receipt |
| • | Mailing Address 414 Praireview Drive | | | 0 4 0 8 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 31572615 |
| | Geneva | IL | 60134-4617 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 240.00 |
| | Name of Employer Unitrin, Inc. | Occupation Vice Pres | n ident/Chief Investment Offic | — ce |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 240.00 | |
| _ | Full Name (Last, First, Middle Initial) Mr. Thomas J. DeFalco | | | Date of Receipt |
| | Mailing Address 132 Bull Run Road | | | 0 4 0 8 2 0 1 0 |
| | City Trenton | State NJ | Zip Code 08638-1316 | Transaction ID: 31572667 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 00000 1010 | 240.00 |
| | Name of Employer NJM Insurance Group | Occupation Vice Pres | ident and Chief Actuary | |
| | Receipt For: Primary General Other (specify) ▼ | | Year-to-Date ▼ 240.00 | |
| | SUBTOTAL of Receipts This Page (optional) | | | 720.00 |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 15 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using to | d Statements may not be sold or used by any perso the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Associat CIPAC) | ion of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Lee Bellarmino | | Date of Receipt |
| Mailing Address 1134 Avrum Drive | | 0 4 0 8 Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31572668 |
| Toms River | NJ 08753-5202 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 600.00 |
| Name of Employer NJM Insurance Group | Occupation VP | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |
| Full Name (Last, First, Middle Initial) Robert R Hill | | Date of Receipt |
| Mailing Address 11726 N 120 St | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31572669 |
| Scottsdale | AZ 85259-3242 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer Assurant Insurance Group | Occupation President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
| Full Name (Last, First, Middle Initial) Fariborz Ghadar | | Date of Receipt |
| Mailing Address 2029 Connecticut Av | venue NW #21 | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31572670 |
| Washington | DC 20008-6142 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 600.00 |
| Name of Employer Westfield Group | Occupation Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 600.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 2200.00 |
| TOTAL This Period (last page this line numb | | |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 16 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|---|--|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) | and Statements may not be sold or used by any person g the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Property Casualty Insurers Associ | iation of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. Patrick W. Breslin | | Date of Receipt |
| Mailing Address 61 Avalon Road | | 04 08 2010 |
| City | State Zip Code | Transaction ID: 31573031 |
| Pennington | NJ 08534-5183 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 480.00 |
| Name of Employer NJM Insurance Group | Occupation Assistant Secretary Communications | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 480.00 | |
| Full Name (Last, First, Middle Initial) Mr. Kenneth L. Fields | | Date of Receipt |
| Mailing Address 40878 Pathfield Dr | r. | 0 4 0 8 2 0 1 0 |
| City | State Zip Code | Transaction ID: 31573032 |
| Columbus | OH 43230 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Ass't Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| Full Name (Last, First, Middle Initial) Clyde H Fitch | | Date of Receipt |
| Mailing Address 697 Dennison Ave | | 0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Columbus | State Zip Code OH 43215-1605 | Transaction ID: 31573033 |
| | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 600.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Sr VP Chief Sales Officer | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |
| SUBTOTAL of Receipts This Page (option | nal) | 1320.00 |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 17 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|--|---|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the | tatements may not be sold or used by any person name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) | | Data of Doggint |
| Mailing Address 7909 Narrow Leaf Dr | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31573034 |
| Blacklick | OH 43004-6044 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation RVP-State Auto Middle Market | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 240.00 | |
| Full Name (Last, First, Middle Initial) Mr. John M. Petrucci | | Date of Receipt |
| Mailing Address 5961 Morganwood Sq. | | 04 08 7 2010 |
| City | State Zip Code | Transaction ID: 31573035 |
| <u>Hilliard</u> | OH 43026-7176 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Director of Sales | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Gregory S. Ramah | | Date of Receipt |
| Mailing Address 22156 Horseshoe Lane |) | 0 4 0 8 2 0 1 0 |
| City | State Zip Code | Transaction ID: 31573083 |
| Strongsville | OH 44149-9254 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Program Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 240.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 980.00 |
| TOTAL This Period (last page this line number of | · | |

| | LE A (FEC Form 3X) D RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 18 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|-----------------------------------|--|------------------------------|---|---|
| or for commerc | n copied from such Reports and scial purposes, other than using the | Statements mage 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 o solicit contributions from such committee. |
| \ | Casualty Insurers Association | n of America | a Political Action Committee | (P- |
| Timothy G. | | | | Date of Receipt |
| Mailing Add | dress 322 Tree Haven Ave. | | | 04 08 2010 |
| City Powell | | State OH | Zip Code 43065-8511 | Transaction ID: 31573084 Amount of Each Receipt this Period |
| FEC ID nur | mber of contributing tical committee. | C | | 240.00 |
| Name of Er State Auto anies | mployer Insurance Comp- | Occupatio Manager | | |
| Receipt For | | Aggregate | e Year-to-Date ▼ 240.00 | |
| Mr. Robert F | (Last, First, Middle Initial) P. Restrepo dress 3301 Ocean Dr. South | | | Date of Receipt |
| | | | | 04 08 2010 |
| City Jacksony | rille Beach | State FL | Zip Code 32250-5964 | Transaction ID: 31573085 Amount of Each Receipt this Period |
| FEC ID nur | mber of contributing tical committee. | C | | 3600.00 |
| Name of Er State Auto anies | mployer Insurance Comp- | Occupatio Chairma | n n and CEO | |
| Receipt For Prima Other | | Aggregate | e Year-to-Date ▼ 3600.00 |] |
| Full Name (| (Last, First, Middle Initial) n Reynolds | | | Date of Receipt |
| Mailing Add | dress 3037 Leeds Road | | | 0 4 |
| City | | State | Zip Code | Transaction ID: 31573086 |
| <u>Columbus</u> | | OH | 43221-2628 | Amount of Each Receipt this Period |
| | mber of contributing tical committee. | C | | 1300.00 |
| anies | Insurance Comp- | Occupatio Resident | : VP | |
| Receipt For Prima | | Aggregate | e Year-to-Date ▼ 1300.00 | |
| SUBTOTAL (| of Receipts This Page (optional) . | 1 | | 5140.00 |
| | Period (last page this line number | | | |

| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements may not be sold or used by any person | |
|---|---|---|
| 'N NAME OF COMMITTER (IN FIII) | ne name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | on of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. Rick L. Holbein | | Date of Receipt |
| Mailing Address 5531 Aryshire Court | | 04 12 2010 |
| City Dublin | State Zip Code OH 43017-9440 | Transaction ID: 31583453 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Branch Manager - VP | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) Mr. David R. Russell Mailing Address 6251 Champions Dri | | Date of Receipt |
| Mailing Address 6351 Champions Dri | ve | 04 12 2010 |
| City Westerville | State Zip Code OH 43082-8595 | Transaction ID: 31583454 |
| FEC ID number of contributing federal political committee. | C 45062-6595 | Amount of Each Receipt this Period 275.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation AVP Enterprise Network Systems | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |
| Full Name (Last, First, Middle Initial) Mr. George Furlong | | Date of Receipt |
| Mailing Address 795 Rodney Drive | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31583455 |
| Nashville | TN 37205-3064 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Regional Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1015.00 |

| SCHEDULE A (FEC Form ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 20 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|--|---|--|
| or for commercial purposes, other than us | s and Statements may not be sold or used by any persor sing the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Associated CIPAC) | ociation of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. David W. Dalton | | Date of Receipt |
| Mailing Address 3450 Heritage C | Oaks Drive | 0 4 1 3 2 0 1 0 |
| City | State Zip Code | Transaction ID: 31583498 |
| <u>Hilliard</u> | OH 43026-7636 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 350.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation VP - Director of Internal Audit | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |
| Full Name (Last, First, Middle Initial) Mr. John Heffernan | | Date of Receipt |
| Mailing Address 1927 Drew Aver | nue | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31583499 |
| Columbus | OH 43235-7411 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Automobile Insurance Company | Occupation AVP,Claims | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| Full Name (Last, First, Middle Initial) Mr. Gene R. Roberts | | Date of Receipt |
| Mailing Address 3636 Mancheste | er Drive | 0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31584080 |
| Powell Control of the | OH 43065-8470 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation AVP Director of Claims Operations | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| SUBTOTAL of Receipts This Page (opt | ional) | 830.00 |

TOTAL This Period (last page this line number only)

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C.

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 21 / 54 (check only one) X 11a |
|---|------------------------------|---|---|
| Any information copied from such Reports and Sta or for 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 solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | of America | a Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Gregory Rose | | | Date of Receipt |
| Mailing Address 12096 Castlestone Dr. | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 31584082 |
| Fishers | IN | 46037-3916 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Territory | n Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 240.00 | |
| Full Name (Last, First, Middle Initial) Keith A Yun | | | Date of Receipt |
| Mailing Address 6718 Braeswick Ct | | | 0 4 1 5 2 0 1 0 |
| City | State | Zip Code | Transaction ID: 31649891 |
| Canal Winchester | OH | 43110-8770 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 325.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Manager | n Non-Standard Auto | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 325.00 | |
| Full Name (Last, First, Middle Initial) Mr. Donald L. Spickler | | | Date of Receipt |
| Mailing Address 4041 Fairway Drive | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Medina | State OH | Zip Code | Transaction ID: 31649892 |
| | | 44256-7849 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 350.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Resident | ⁿ Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 350.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 915.00 |

TOTAL This Period (last page this line number only)

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 22 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|-----------|--|--|---|
| Ar | y information copied from such Reports and for commercial purposes, other than using the | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | on of America Political Action Committee | (P- |
| <u>/_</u> | Full Name (Last, First, Middle Initial) Mr. Larry D. Williams | | Date of Receipt |
| | Mailing Address 1045 N 3B'S & K Roa | ad | 0 4 1 6 2 0 1 0 |
| | City | State Zip Code | Transaction ID: 31649893 |
| | Sunbury | OH 43074 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 400.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Vice President | |
| | Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 400.00 | |
| | Full Name (Last, First, Middle Initial) Donald Applegate | | Date of Receipt |
| | Mailing Address 9 Hickory Drive | | 04 16 4 2010 |
| | City | State Zip Code | Transaction ID: 31649895 |
| | Columbus | NJ 08022-2235 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 240.00 |
| | Name of Employer Farmers Insurance Company of Flemingto | Occupation President and CEO | |
| | Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 240.00 |] |
| | Full Name (Last, First, Middle Initial) Alita A. Burke | | Date of Receipt |
| | Mailing Address 5772 Lakeview Dr. | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State Zip Code | Transaction ID: 31649915 |
| | Hilliard | OH 43026-1370 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 250.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Personal Lines Territory Manager | |
| | Receipt For: | Aggregate Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 250.00 | |
| Г | | | 890.00 |

В.

C.

| SCHEDULE A (FEC Form 3X) | | Han annual and the Co | FOR LINE NUMBER: PAGE 23 / 54 |
|---|------------------------------|---|--|
| - | | Use separate schedule(s) for each category of the | (check only one) |
| ITEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 |
| | | | 13 14 15 16 17 |
| Any information copied from such Reports and Stor for commercial purposes, other than using the | atements may name and add | 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) | | | |
| Property Casualty Insurers Association CIPAC) | of America | Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. Al Meyer | | | Date of Receipt |
| Mailing Address 8818 Royal Oaks Drive | ! | | 04 19 2010 |
| City | State | Zip Code | Transaction ID: 31657075 |
| Madison | WI | 53593-7954 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 300.00 |
| Name of Employer American Family Insurance Group | Occupation Vice Pres | n sident Marketing | |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary General | | 300.00 | |
| Other (specify) ▼ | | | |
| Full Name (Last, First, Middle Initial) Mr. John B. Millet, Jr. | | | Date of Receipt |
| Mailing Address 2175 Beech Grove Place | ce. | | M M / D D / Y Y Y Y |
| | | | 04 19 2010 |
| City | State | Zip Code | Transaction ID: 31657076 |
| <u>Utica</u> | NY | 13501-1797 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 275.00 |
| Name of Employer Utica First Insurance Com- | Occupation Director | ٦ | |
| pany Receipt For: | Aggregate | Year-to-Date ▼ | 7 |
| Primary General | 199.191 | | |
| Other (specify) ▼ | | 275.00 | |
| Full Name (Last, First, Middle Initial) | | | |
| Mr. Jerome G. Rekowski | | | Date of Receipt |
| Mailing Address 1993 Skyline Drive | | | 04 19 2010 |
| City | State | Zip Code | Transaction ID: 31657083 |
| Stoughton | WI | 53589-3253 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 300.00 |
| Name of Employer American Family Insurance Group | Occupation Vice Pres | n sident-Commercial and Farm | n-Ran |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary General | ' ' | 300.00 | |
| Other (specify) | | 300.00 | |
| | | | 875.00 |
| SUBTOTAL of Receipts This Page (optional) | | ······ | 0/5.00 |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) | d Statements may not be sold or used by any pers the name and address of any political committee | |
| / CIPAC) | ion of America Political Action Committee | e (P- |
| Full Name (Last, First, Middle Initial) Mr. Matthew S. Mrozek | | Date of Receipt |
| Mailing Address 1877 Bierstad Drive City | State Zip Code | 0 4 1 6 2 0 1 0 Transaction ID: 31657084 |
| Powell | OH 43065-8816 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 350.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Actuary | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |
| Full Name (Last, First, Middle Initial) Mr. Bradley J. Gleason Mailing Address 3727 Nelson Lane | | Date of Receipt |
| Mailing Address 3/2/ Nelson Lane | | 04 20 2010 |
| City | State Zip Code | Transaction ID: 31657086 |
| Deerfield | WI 53531-9707 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer American Family Insurance Group | Occupation Exec Vice President | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) Mr. David R. Anderson | | Date of Receipt |
| Mailing Address 4717 Fond Du Lac T | errace | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| City | State Zip Code | Transaction ID: 31657087 |
| Madison FEC ID number of contributing | WI 53705-4812 | Amount of Each Receipt this Period |
| federal political committee. | C | 600.00 |
| Name of Employer American Family Insurance Group | Occupation President & COO | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | _ |
| Primary ☐ General Other (specify) ▼ | 600.00 | |
| SUBTOTAL of Receipts This Page (optional | | 1250.00 |

В.

C.

| 001150111 5 4 /550 | | FOR LINE NUMBER. BACE OF 154 |
|--|--|--|
| SCHEDULE A (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 25 / 54 (check only one) |
| ITEMIZED RECEIPTS | for each category of the | X 11a 11b 11c 12 |
| | Detailed Summary Page | 13 14 15 16 17 |
| Any information copied from such Reports and So or for commercial purposes, other than using the | tatements may not be sold or used by any personame and address of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | |
| Property Casualty Insurers Association CIPAC) | n of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Marc A Meiches | | Date of Receipt |
| Mailing Address 43 Paine Ave. | | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| City | State Zip Code | Transaction ID: 31657090 |
| Prides Crossing | MA 01965 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1500.00 |
| Name of Employer Electric Insurance Group | Occupation President & CEO | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 1500.00 | 1 |
| Other (specify) | 1300.00 | |
| Full Name (Last, First, Middle Initial) Mr. Terrence P. Higerd | | Date of Receipt |
| Mailing Address 1027 Walsingham Cou | ırt | M M / D D / Y Y Y Y |
| | | 04 20 2010 |
| City | State Zip Code | Transaction ID: 31657091 |
| Westerville | OH 43081-2768 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Vice President Director MIS | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 |] |
| Full Name (Last, First, Middle Initial) Cynthia Lin | | Date of Receipt |
| Mailing Address 1121 Pebble Brook Dr | | 04 20 7 2010 |
| City | State Zip Code | Transaction ID: 31657436 |
| Columbus | OH 43240-6015 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | 500.00 |
| federal political committee. | C | |
| federal political committee. Name of Employer State Auto Insurance Comp- | Occupation Methodologist I | |
| federal political committee. | Occupation | |
| Name of Employer State Auto Insurance Companies Receipt For: Primary General | Occupation Methodologist I Aggregate Year-to-Date ▼ | 1 |
| Name of Employer State Auto Insurance Companies Receipt For: | Occupation Methodologist I | |
| Name of Employer State Auto Insurance Companies Receipt For: Primary General | Occupation Methodologist I Aggregate Year-to-Date ▼ | |

TOTAL This Period (last page this line number only)

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 26 / 54 (check only one) X |
|---------|---|-------------------------------|---|---|
| , | Any information copied from such Reports and St or for commercial purposes, other than using the | tatements may name and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America | Political Action Committee | (P- |
| ۷. | Full Name (Last, First, Middle Initial) Keith ller | | | Date of Receipt |
| | Mailing Address 3755 Stonington PL | | | 04 19 2010 |
| | City | State | Zip Code | Transaction ID: 31657437 |
| | Zionsville | IN | 46077-7003 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Territory | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 250.00 | |
| — В. | Full Name (Last, First, Middle Initial) Daniel O. Kennedy | | | Date of Receipt |
| | Mailing Address 570 Forsetdale Drive | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 31657438 |
| | Atlanta | GA | 30342 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 275.00 |
| | Name of Employer RLI | Occupation General (| | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 275.00 | |
| _ C. | Full Name (Last, First, Middle Initial) Peter C Gunder | | | Date of Receipt |
| | Mailing Address 4505 Nina Lane | | | 04 22 7 2010 |
| | City <u>Madison</u> | State WI | Zip Code 53783-0001 | Transaction ID: 31666021 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 600.00 |
| | Name of Employer American Family Insurance Group | Occupation Senior Vi | n ice President | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 600.00 | |
| | SUBTOTAL of Receipts This Page (optional) | |) | 1125.00 |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 27 / 54 (check only one) X 11a |
|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | on of America Political Action Committee | |
| Full Name (Last, First, Middle Initial) Mr. Daniel R. Schultz | | Date of Receipt |
| Mailing Address 1208 Pocahontas Dri | ve | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31666027 |
| Monona | WI 53716-2961 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 700.00 |
| Name of Employer American Family Insurance Group | Occupation Chief Financial Officer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 700.00 | |
| Full Name (Last, First, Middle Initial) Gary D Hallman | | Date of Receipt |
| Mailing Address 4070 Fox Meadow Dr | ive | 04 22 7 2010 |
| City | State Zip Code | Transaction ID: 31666028 |
| <u>Medina</u> | OH 44256-7836 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 600.00 |
| Name of Employer Westfield Group | Occupation Director | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |
| Full Name (Last, First, Middle Initial) Mr. Douglas E. Allen | | Date of Receipt |
| Mailing Address 145 N High St. #1101 | | 04 23 7 2010 |
| City | State Zip Code | Transaction ID: 31672559 |
| Columbus | OH 43215-3006 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 480.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Vice President & IT Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 480.00 |] |
| SUBTOTAL of Receipts This Page (optional) | | 1780.00 |
| TOTAL This Period (last page this line number | · | |

| | CHEDULE A (FEC Form 3X EMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 28 / 54 (check only one) X 11a |
|----|---|---|---|
| Ar | for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Property Casualty Insurers Associate | d Statements may not be sold or used by any pe the name and address of any political committee tion of America Political Action Committee | erson for the purpose of soliciting contributions e to solicit contributions from such committee. |
| | CIPAC) Full Name (Last, First, Middle Initial) Leonard S Genders Mailing Address 2110 Twin Flower ci | rcle | Date of Receipt |
| | City | State Zip Code | 0 4 2 3 2 0 1 0 Transaction ID: 31672577 |
| | Grove City | OH 43123-8559 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 251.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation AVP / IT Director | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 251.00 | |
| | Full Name (Last, First, Middle Initial) Stephen J Denino | | Date of Receipt |
| | Mailing Address 5387 Meadow Grove | 04 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | City | State Zip Code | Transaction ID: 31672578 |
| | Grove City | OH 43123-8782 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 240.00 |
| | Name of Employer State Auto Insurance Comp- anies | Occupation Manager - IT Governance | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| | Full Name (Last, First, Middle Initial) Mr. Seth A. Davis | | Date of Receipt |
| | Mailing Address 7220 N. Wescoh Co | urt | 0 4 2 2 2 2 0 1 0 |
| | City | State Zip Code | Transaction ID: 31672580 |
| | Peoria | IL 61615 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 240.00 |
| | Name of Employer RLI | Occupation V P Internal Audit | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| S | UBTOTAL of Receipts This Page (optional) | | 731.00 |

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C.

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 29 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|--|---|
| Any information copied from such Reports and Statemer or for commercial purposes, other than using the name | ents may not be sold or used by any perso and address of any political committee to | n for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association of A | merica Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. Steven E. English | | Date of Receipt |
| Mailing Address 6608 Carinlough Pl | | 04 / 26 / 2010 |
| • | State Zip Code DH 43016-6005 | Transaction ID: 31672662 |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 400.00 |
| State Auto Insurance Companies | cupation ce President &Chief Financial Office gregate Year-to-Date 400.00 | 9 |
| Full Name (Last, First, Middle Initial) Darren K Dunn Mailing Address N4821 Linse Rd | | Date of Receipt |
| | | 04 26 2010 |
| • | State Zip Code VI 54669-9505 | Transaction ID: 31672664 |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 240.00 |
| State Auto Insurance Companies | ersonal Insurance Sales Manager gregate Year-to-Date 240.00 | |
| Full Name (Last, First, Middle Initial) Chris Kamer | | Date of Receipt |
| Mailing Address 5977 Heritage View Ct | | 0 4 2 6 2 0 1 0 |
| • | State Zip Code DH 43026-7662 | Transaction ID: 31673290 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 240.00 |
| State Auto Incurance Comp | cupation Manager | |
| Receipt For: Primary General Other (specify) ▼ | gregate Year-to-Date ▼ 240.00 | |
| SUBTOTAL of Receipts This Page (optional) | > | 880.00 |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 30 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may not be sold or used by any persor e name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Associatio CIPAC) | on of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Ms. Kim Eri Bailey | | Date of Receipt |
| Mailing Address 12436 Stone Drive City | State Zip Code | 0 4 2 6 2 0 1 0 Transaction ID: 31674878 |
| Indianapolis | IN 46236-9209 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 360.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Vice President, Director of MIS | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |
| Full Name (Last, First, Middle Initial) Michael R Reed | | Date of Receipt |
| Mailing Address 322 Hastings CT | | 04 26 2010 |
| City | State Zip Code | Transaction ID: 31674882 |
| Westerville | OH 43082-6004 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation IT Applications Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| Full Name (Last, First, Middle Initial) Mr. Andrew S. Frazier | 1 | Date of Receipt |
| Mailing Address 23 Sherwood Downs | | 0 4 2 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 31674883 |
| Park Ridge | NJ 07656-2603 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 3600.00 |
| Name of Employer Western World Insurance Group | Occupation President and Chief Executive Officer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 3600.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 4200.00 |
| TOTAL This Period (last page this line number | <u> </u> | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 31 / 54 (check only one) X | |
|---|--|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any persor e name and address of any political committee to | | |
| NAME OF COMMITTEE (In Full) | on of America Political Action Committee | | |
| Full Name (Last, First, Middle Initial) Patrick M Dukes | | Date of Receipt | |
| Mailing Address 1930 Riverside Drive | | 0 4 2 8 2 0 1 0 | |
| City | State Zip Code | Transaction ID: 31688268 | |
| Upper Arlington | OH 43221-4129 | Amount of Each Receipt this Period | |
| FEC ID number of contributing federal political committee. | C | 240.00 | |
| Name of Employer State Auto Insurance Comp- | Occupation Compliance Officer | | |
| <u>anies</u> Receipt For: | Aggregate Year-to-Date ▼ | | |
| Primary General Other (specify) ▼ | 240.00 | | |
| Full Name (Last, First, Middle Initial) Ms. Cynthia Powell | | Date of Receipt | |
| Mailing Address 2204 Stratingham Dri | ve | M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| City | State Zip Code | | |
| <u>Dublin</u> | OH 43016-8908 | Amount of Each Receipt this Period | |
| FEC ID number of contributing federal political committee. | C | 650.00 | |
| Name of Employer State Automobile Mutual Insurance Comp | Occupation Vice President & Comptroller | 7 | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| Primary General Other (specify) ▼ | 650.00 | | |
| Full Name (Last, First, Middle Initial) Ms. Karen Murphy | | Date of Receipt | |
| Mailing Address 1742 Seagull Court Apt 305 | | 04 28 2010 | |
| City | State Zip Code | Transaction ID: 31688270 | |
| Reston | VA 20194-4309 | Amount of Each Receipt this Period | |
| FEC ID number of contributing federal political committee. | C | 350.00 | |
| Name of Employer Medmarc Insurance Group | Occupation Sr Vice President & General Counsel | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| Primary General Other (specify) ▼ | 350.00 | | |
| | | 1240.00 | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 32 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any persor e name and address of any political committee to s | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | on of America Political Action Committee | (P- |
| Full Name (Last, First, Middle Initial) Mr. Thomas R. Brown | | Date of Receipt |
| Mailing Address 30 Fredrick Avenue | Chata Zin Code | 04 28 2010 |
| City Atherton | State Zip Code CA 94027-2204 | Transaction ID: 31688272 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 2700.00 |
| Name of Employer California Casualty Group | Occupation Chairman and Chief Executive Officer | - |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 2700.00 | |
| Full Name (Last, First, Middle Initial) Mr. Joel Brown | | Date of Receipt |
| Mailing Address 8739 Sweetwater Ct | | 04 28 2010 |
| City | State Zip Code | Transaction ID: 31688273 |
| Powell FEC ID number of contributing federal political committee. | OH 43065-8364 | Amount of Each Receipt this Period 600.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Regional Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |
| Full Name (Last, First, Middle Initial) Judy A. Snyder | _ L | Date of Receipt |
| Mailing Address 565 Glenn Haven Rd | | 0 4 2 8 2 0 1 0 |
| City | State Zip Code | Transaction ID: 31688276 |
| Upper Sandusky FEC ID number of contributing federal political committee. | OH 43351-9312 | Amount of Each Receipt this Period 240.00 |
| Name of Employer State Auto Insurance Comp- anies | Occupation Personal Lines Underwriting Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 3540.00 |
| TOTAL This Period (last page this line numbe | | |

| | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 33 / 54 (check only one) X |
|---|--|---|---|---|
| 4 | ny information copied from such Reports and S r for commercial purposes, other than using the | Statements may e name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Associatio CIPAC) | n of America | a Political Action Committee | (P- |
| | Full Name (Last, First, Middle Initial) Mr. Gregory V. Ostergren | | | Date of Receipt |
| | Mailing Address Corporate Centre 1949 East Sunshine | | | 04 / 30 / 2010 |
| | City Springfield | State MO | Zip Code 65899-0001 | Transaction ID: PR1456193323771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 00000 0001 | 300.00 |
| | Name of Employer American National Property and Casualt | , ' | n President and CEO | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1200.00 | P/R Deduction (\$300.00 Monthly) |
| _ | Full Name (Last, First, Middle Initial) Ms. June T. Holmes | | | Date of Receipt |
| | Mailing Address 409 S. Vine | 0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: PR1456336823771 |
| | Park Ridge | IL | 60068-4145 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer Property Casualty Insurers | Occupatio Treasure | | |
| | Association Receipt For: | 1 | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 1200.00 | P/R Deduction (\$150.00 Semi-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Ms. Joanne M. Orfanos | | | Date of Receipt |
| | Mailing Address 2104 Butternut Lane | | | 04 30 2010 |
| | City | State | Zip Code | Transaction ID: PR1456395523771 |
| | Northbrook | <u>IL</u> | 60062-6608 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 100.00 |
| | Name of Employer Property Casualty Insurers Association | , ' | lembership & Marketing Cor | nmunica |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 400.00 | P/R Deduction (\$50.00 Semi-Monthly) |
| Γ | SUBTOTAL of Receipts This Page (optional) | | | 700.00 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 34 / 54 (check only one) X 11a |
|---|--|---|---|---|
| 4 | Any information copied from such Reports and Sor 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 | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Associatio CIPAC) | n of America | a Political Action Committee | (P- |
| | Full Name (Last, First, Middle Initial) Mr. Bruce D Trost Mailing Address 13749 Bay Hill Court | | | Date of Receipt |
| | City | State | Zip Code | 0 4 3 0 2 0 1 0 Transaction ID: PR1456453323771 |
| | Clive | IA | 50325-8563 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 416.67 |
| | Name of Employer FBL Financial Group | Occupation Executive | n e Vice President | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1666.68 | P/R Deduction (\$416.67 Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Scott A. Joyner | | | Date of Receipt |
| | Mailing Address 57 E. Delaware #2105 | | | 04 30 7 2010 |
| | City Chicago | State IL | Zip Code | Transaction ID: PR1456541523771 |
| | FEC ID number of contributing federal political committee. | C | 60611-1476 | Amount of Each Receipt this Period 213.00 |
| | Name of Employer Property Casualty Insurers Association | Occupation Vice Pres | n sident Information Technolo | gy |
| | Receipt For: Primary General Other (specify) ♥ | Aggregate | e Year-to-Date ▼ 852.00 | P/R Deduction (\$106.50 Semi-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Steven Wittmuss | | | Date of Receipt |
| | Mailing Address 7410 Lambert Place | | | 0 4 3 0 Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR1456694623771 |
| | Lincoln FEC ID number of contributing | NE C | 68516-5813 | Amount of Each Receipt this Period 100.00 |
| | rederal political committee. Name of Employer FBL Financial Group | Occupation | n Claims Vice President | |
| | Receipt For: Primary General Other (specify) ▼ | , ' | Year-to-Date ▼ 400.00 | P/R Deduction (\$100.00 Monthly) |
| | SUBTOTAL of Receipts This Page (optional) | 1 | | 729.67 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 35 / 54 (check only one) X |
|----------|--|---|---|---|
| Ar | ny information copied from such Reports and S for commercial purposes, other than using the | Statements may | 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) Property Casualty Insurers Associatio CIPAC) | | | |
| <u>/</u> | Full Name (Last, First, Middle Initial) Ms. Susan G. Vincent | | | Date of Receipt |
| | Mailing Address 1787 Sheffield | | | 0 4 3 0 2 0 1 0 |
| | City Birmingham | State MI | Zip Code 48009-7224 | Transaction ID: PR1456707723771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 150.00 |
| | Name of Employer Amerisure Companies | Occupatio VP-Gene | n eral Counsel & Sec. | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 450.00 | P/R Deduction (\$50.00 Bi- Weekly) |
| | Full Name (Last, First, Middle Initial) Mr. Timothy J. Quinn | | | Date of Receipt |
| | Mailing Address 5749 Old US 23 | 0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: PR1456707823771 |
| | FEC ID number of contributing federal political committee. | C | 48430-9372 | Amount of Each Receipt this Period 75.00 |
| | Name of Employer Amerisure Companies | Occupatio VP-Treas | | |
| | Receipt For: Primary General Other (specify) ▼ | - t - t | e Year-to-Date ▼ 225.00 | P/R Deduction (\$25.00 Bi-Weekly) |
| | Full Name (Last, First, Middle Initial) Mr. David B. Hostetter | | | Date of Receipt |
| | Mailing Address 37154 Weymouth | | | M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O |
| | City | State | Zip Code | Transaction ID: PR1456707923771 |
| | Livonia FEC ID number of contributing federal political committee. | C | 48152-4096 | Amount of Each Receipt this Period 75.00 |
| | Name of Employer Amerisure Companies | Occupatio VP-Und | n & Prod Mgmt | |
| | Receipt For: Primary General Other (specify) ▼ | , ' | e Year-to-Date ▼ 225.00 | P/R Deduction (\$25.00 Bi-Weekly) |
| S | UBTOTAL of Receipts This Page (optional) | <u> </u> | | 300.00 |

| | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 36 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|---|---|-----------------------------------|---|---|
| A | any information copied from such Reports and r for commercial purposes, other than using the | Statements may ne name and add | not be sold or used by any pers dress of any political committee to | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Associati CIPAC) | on of America | Political Action Committee | · (P- |
| | Full Name (Last, First, Middle Initial) Ms. Debra Szmagaj | | | Date of Receipt |
| | Mailing Address 1267 Old Milford Far | ms | | 04 30 2010 |
| | City | State | Zip Code | Transaction ID: PR1456708123771 |
| | Milford | MI | 48381-3373 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 75.00 |
| | Name of Employer Amerisure Companies | Occupation VP Bus. | n Application Serv | |
| | Receipt For: | Aggregate | Year-to-Date V | |
| | Primary General Other (specify) ▼ | 0 0 | 225.00 | P/R Deduction (\$25.00 Bi- Weekly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Don A. Smith | | | Date of Receipt |
| | Mailing Address 54021 Trent River Dr | 04 / 30 / 2010 | | |
| | City | State | Zip Code | Transaction ID: PR1456708223771 |
| | Shelby Township | MI | 48315-1438 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 75.00 |
| | Name of Employer Amerisure Companies | Occupation VP-Claim | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 225.00 | P/R Deduction (\$25.00 Bi- Weekly) |
| | Full Name (Last, First, Middle Initial) Mr. Thomas E. Hoeg | | | Date of Receipt |
| | Mailing Address 17950 Cranbrook Co | urt | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR1456708423771 |
| | Northville | MI | 48167-4335 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 150.00 |
| | Name of Employer Amerisure Companies | Occupation Executive | n e VP-COO | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 450.00 | P/R Deduction (\$50.00 Bi- Weekly) |
| | SUBTOTAL of Receipts This Page (optional) | | | 300.00 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 37 / 54 (check only one) X |
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| | Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America | a Political Action Committee | (P- |
| . Z | Full Name (Last, First, Middle Initial) Mr. Roy D Kinnan | | | Date of Receipt |
| | Mailing Address 46139 Galway Drive | | | 04 30 2010 |
| | City Novi | State MI | Zip Code 48374-3972 | Transaction ID: PR1456708923771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 75.00 |
| | Name of Employer Amerisure Companies | Occupation SR VP-C | n FO & Treasurer | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 225.00 | P/R Deduction (\$25.00 Bi- Weekly) |
| | Full Name (Last, First, Middle Initial) Mr. Derick Adams | | | Date of Receipt |
| | Mailing Address 26777 Halsted Road | | | 04 30 7 2010 |
| | City | State | Zip Code | Transaction ID: PR1456719923771 |
| | Farmington Hills FEC ID number of contributing federal political committee. | C | 48331-3577 | Amount of Each Receipt this Period 90.00 |
| | Name of Employer Amerisure Companies | Occupation VP-Huma | n an Resources | |
| | Receipt For: Primary General Other (specify) ♥ | Aggregate | e Year-to-Date ▼ 270.00 | P/R Deduction (\$30.00 Bi- Weekly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Daniel J. Graf | | | Date of Receipt |
| | Mailing Address 45000 Drocton | | | 0 4 3 0 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: PR1456720623771 |
| | Novi FEC ID number of contributing federal political committee. | C | 48375-3802 | Amount of Each Receipt this Period 150.00 |
| | Name of Employer Amerisure Companies | Occupation VP-Invest | | |
| | Receipt For: Primary General Other (specify) ▼ | , ' | e Year-to-Date ▼ 450.00 | P/R Deduction (\$50.00 Bi- Weekly) |
| | SUBTOTAL of Receipts This Page (optional) | | | 315.00 |

| Γ | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 38 / 54 (check only one) X |
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| 4 | 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 o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America | Political Action Committee | (P- |
| | Full Name (Last, First, Middle Initial) Mr. Michael Dieterle | | | Date of Receipt |
| | Mailing Address 47202 White Pines Dri | ive | | 0 4 3 0 Y Y Y Y Y Y Y |
| | City Novi | State MI | Zip Code 48374-3697 | Transaction ID: PR1456721823771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 120.00 |
| | Name of Employer Amerisure Companies | Occupation VP-Fld M | n lkt & Undrwrtng | |
| | Receipt For: Primary General Other (specify) | , ' | Year-to-Date ▼ 360.00 | P/R Deduction (\$40.00 Bi-Weekly) |
| | Full Name (Last, First, Middle Initial) Mr. Michael F. Gilhooly | 1 | | Date of Receipt |
| | Mailing Address 12135 Flambeau Drive | Э | | 0 4 3 0 Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR1456768823771 |
| | Palos Heights | IL | 60463-1659 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 60.00 |
| | Name of Employer Property Casualty Insurers Association Receipt For: | 1 | n State Political Affairs Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | Aggregate | 240.00 | P/R Deduction (\$30.00 Sem- i-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Todd B. Ruthruff | | | Date of Receipt |
| | Mailing Address 14615 Tudor Chase Di | rive | | 0 4 3 0 Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR1566733123771 |
| | Tampa FEC ID number of contributing federal political committee. | FL C | 33626-3338 | Amount of Each Receipt this Period 75.00 |
| | Name of Employer Amerisure Companies | Occupation VP - Age | ncy Ser Group | |
| | Receipt For: Primary General Other (specify) ▼ | , ' | Year-to-Date ▼ 225.00 | P/R Deduction (\$25.00 Bi- Weekly) |
| | SUBTOTAL of Receipts This Page (optional) | 1 | | 255.00 |

| | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | Use separate schedule(s for each category of the Detailed Summary Page | (Crieck Orlly Orle) |
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| A | Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any ename and address of any political commit | person for the purpose of soliciting contributions tee to solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America Political Action Comm | ittee (P- |
| | Full Name (Last, First, Middle Initial) Mr. Mark F. Fox | | Date of Receipt |
| | Mailing Address 29911 Robert | 7.01 | 04 30 2010 |
| | City <u>Livonia</u> | State Zip Code MI 48150-3045 | Transaction ID: PR1578285423771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 90.00 |
| | Name of Employer Amerisure Companies | Occupation VP Special Risk Undrwrtg | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | P/R Deduction (\$30.00 Bi-Weekly) |
| _ | Full Name (Last, First, Middle Initial) Ms. Ann W. Spragens | | Date of Receipt |
| | Mailing Address 5510 Chase Avenue | | 04 30 4 2010 |
| | City | State Zip Code | Transaction ID: PR1632493223771 |
| | Downers Grove | IL 60515-4268 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | 100.00 |
| | Name of Employer Property Casualty Insurers Association | Occupation SR VP President Secretary & Ge | eneral Co |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | P/R Deduction (\$50.00 Sem- i-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Benjamin J. McKay | | Date of Receipt |
| | Mailing Address 1401 South Joyce Str | eet | 0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State Zip Code | Transaction ID: PR1695170223771 |
| | Arlington FEC ID number of contributing federal political committee. | VA 22202-1874 | Amount of Each Receipt this Period 208.34 |
| | Name of Employer Property Casualty Insurers Association | Occupation Sr. VP Federal Government Rela | ations |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 833.36 | P/R Deduction (\$104.17 Semi-Monthly) |
| Г | SUBTOTAL of Receipts This Page (optional) . | 1 | 398.34 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 40 / 54 (check only one) X |
|----------|---|---------------------|---|---|
| 0 | ny information copied from such Reports and for commercial purposes, other than using the | Statements ma | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Associati | on of America | a Political Action Committee | (P- |
| \angle | CIPAC) | | | ` |
| | Full Name (Last, First, Middle Initial) Mr Thomas R. Litjen | | | Date of Receipt |
| | Mailing Address 3917 Barcroft Mews | Court | | 04 / 30 / 2010 |
| | City | State | Zip Code | Transaction ID: PR1790384223771 |
| | Falls Church | VA | 22041-1235 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 208.34 |
| | Name of Employer Property Casualty Insurers | Occupation VP Fede | n ral Government Relations | |
| | Association Receipt For: | | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 833.36 | P/R Deduction (\$104.17 Semi-Monthly) |
| _ | Full Name (Last, First, Middle Initial) D. Kenton Brine | | | Date of Receipt |
| | Mailing Address 1500 Water Street S | SW No 2 | | 04 30 2010 |
| | City | State | Zip Code | Transaction ID: PR1829855023771 |
| | <u>Olympia</u> | WA | 98501-2295 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 60.00 |
| | Name of Employer Property Casualty Insurers Association | Occupation Asst. VP | n State Government Relation | s |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 240.00 | P/R Deduction (\$30.00 Semi- i-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Kurt D Gallinger | | | Date of Receipt |
| | Mailing Address 26777 Halsted Road | | | M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR2020349223771 |
| | Farmington Hills | MI | 48331-3577 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 180.00 |
| | Name of Employer Amerisure Companies | Occupation VP Gov | n Rel & Counselor | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 540.00 | P/R Deduction (\$60.00 Bi- Weekly) |
| Γ, | SUBTOTAL of Receipts This Page (optional) | 1 | | 448.34 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 41 / 54 (check only one) X |
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| A | Any information copied from such Reports and or for commercial purposes, other than using the | Statements may | 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) Property Casualty Insurers Association CIPAC) | on of America | a Political Action Committee | (P- |
| ∠ 4. | Full Name (Last, First, Middle Initial) Debra Even | | | Date of Receipt |
| | Mailing Address 26777 Halsted | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR2059592223771 |
| | Farmington Hills | MI | 48331-3577 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 75.00 |
| | Name of Employer Amerisure Companies | Occupation AVP, Cre | n edit & Collection | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 225.00 | P/R Deduction (\$25.00 Bi- Weekly) |
| _ 3. | Full Name (Last, First, Middle Initial) Vincent T Donnelly | | | Date of Receipt |
| | Mailing Address 174 Meadow View La | ıne | | 04 30 4 2010 |
| | City | State | Zip Code | Transaction ID: PR2151653923771 |
| | <u>Lansdale</u> | PA | 19446-5931 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 100.00 |
| | Name of Employer PMA Insurance Group | Occupation Presiden | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 400.00 | P/R Deduction (\$50.00 Semi-Monthly) |
| _). | Full Name (Last, First, Middle Initial) Leo M Orth, Jr | | | Date of Receipt |
| | Mailing Address 14614 Wilden Drive | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: PR2194743423771 |
| | <u>Urbandale</u> | IA | 50323-2070 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 60.00 |
| | Name of Employer FBL Financial Group | Occupation Vice Pres | n sident Research & Developn | nent |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 240.00 | P/R Deduction (\$60.00 Mon- thly) |
| Γ | SUBTOTAL of Receipts This Page (optional) | 1 | | 235.00 |

| ľ | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 42 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 1 |
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| 1 | Any information copied from such Reports and Sor for commercial purposes, other than using the | tatements may not be sold or used by any personame and address of any political committee t | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America Political Action Committee | e (P- |
| | Full Name (Last, First, Middle Initial) David A. Sampson | | Date of Receipt |
| | Mailing Address 2435 Luckett Ave | | 04 30 2010 |
| | City Vienna | State Zip Code VA 22180-6819 | Transaction ID: PR2228336723771 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 355.00 |
| | Name of Employer Property Casualty Insurers Association | Occupation President and CEO | |
| | Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 1420.00 | P/R Deduction (\$177.50 Semi-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Deirdre Manna | | Date of Receipt |
| | Mailing Address 1548 Maple Avenue | | 04 / 30 / 2010 |
| | City Northbrook | State Zip Code IL 60062-5475 | Transaction ID: PR2247336323771 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 100.00 |
| | Name of Employer Property Casualty Insurers Association Receipt For: Primary General Other (specify) | Occupation VP Industry Regulatory & Political A Aggregate Year-to-Date 400.00 | ff P/R Deduction (\$50.00 Sem-i-Monthly) |
| _ | Full Name (Last, First, Middle Initial) Mr. Scott A. Kappmeyer | <u> </u> | Date of Receipt |
| | Mailing Address 1054 186th Street | | 04 30 2010 |
| | City | State Zip Code | Transaction ID: PR2247688723771 |
| | Homewood FEC ID number of contributing federal political committee. | IL 60430-3518 | Amount of Each Receipt this Period 100.00 |
| | Name of Employer Property Casualty Insurers Association Receipt For: | Occupation SR VP Finance & Administration Aggregate Year-to-Date | |
| | Primary General Other (specify) ▼ | Aggregate Year-to-Date V | P/R Deduction (\$50.00 Sem- i-Monthly) |
| | SUBTOTAL of Receipts This Page (optional) | 1 | 555.00 |

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PAGE 43/54 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Property Casualty Insurers Association of America Political Action Committee (P-CIPAC) Full Name (Last, First, Middle Initial) Marguerite Tortorello Date of Receipt Mailing Address 4711 North Kenmore 0.4 3 0 2010 City State Zip Code Transaction ID: PR2357924923771 Chicago IL 60640-5980 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Property Casualty Insurers Association Occupation Sr Vice President Public Affairs Receipt For: Aggregate Year-to-Date General Primary P/R Deduction (\$150.00 Se-1200.00 Other (specify) mi-Monthly) Full Name (Last, First, Middle Initial) Paul Blume, JR Date of Receipt Mailing Address 430 W. sheridan Place 0.4 30 2010 City State Zip Code Transaction ID: PR2400795623771 Lake Bluff IL 60044-2327 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Property Casualty Insurers Occupation SR VP State Government Relations Association Receipt For: Aggregate Year-to-Date Primary General

800.00

| SUBTOTAL of Receipts This Page (optional) | • | 500.00 |
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| TOTAL This Period (last page this line number only) | • | 45607.35 |

Other (specify)

P/R Deduction (\$100.00 Se-

mi-Monthly)

| | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 44 / 54 (check only one) 11a 11b X 11c 12 13 14 15 16 17 |
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| | Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may | y not be sold or used by any pers dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America | a Political Action Committee | (P- |
| Α. | Full Name (Last, First, Middle Initial) Alabama Farmers Federation (ALFA PAC) | | | Date of Receipt |
| | Mailing Address P. O. Box 11023 | | | 0 4 |
| | City | State | Zip Code | Transaction ID: 31572697 |
| | Mongomery | AL | 36191 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 5000.00 |
| | Name of Employer | Occupatio | n | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 5000.00 | |
| В. | Full Name (Last, First, Middle Initial) Farmers Mutual Hail PAC | | | Date of Receipt |
| | Mailing Address 2323 Grand Avenue | | | 0 4 1 5 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 31649896 |
| | Des Moines | IA | 50312 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 2000.00 |
| | Name of Employer | Occupatio | n | |
| | Receipt For: Primary General Other (specify) | 11. | e Year-to-Date ▼ 2000.00 |] |

| SUBTOTAL of Receipts This Page (optional) | • | 7000.00 |
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| TOTAL This Period (last page this line number only) | • | 7000.00 |

| SCHEDULE B (FEC FOIIII 3X) | Use separate schedule(s) | | OR LINE I | | R: | L P. | AGE 45/ | 54 |
|--|---|-----------------|-------------------------|-----------------------|-------------------------|----------------------|-------------------|--------|
| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | check only 21b 27 | one)] 22 28a | 23 28b | 24 28c | 25 X 29 | |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam | | | y person fo | or the pu | rpose of s | oliciting c | ontribution | |
| NAME OF COMMITTEE (In Full) | | | | | | | | |
| Property Casualty Insurers Association of CIPAC) | America Political Action (| Comr | nittee (P | - | | | | |
| Full Name (Last, First, Middle Initial) Republican Party of Wisconsin - Federal A | ccount | | | | action ID | | 2751 | |
| Mailing Address 148 East Johnson Street | | | | 0 ^M 4 | M / D | 5 / | žoj(| O Y |
| City Madison | State Zip Code WI 53703 | | | Amou | nt of Each | Disburse | ement this | Period |
| Purpose of Disbursement | 33703 | | | | | | 1000.00 |) |
| Candidate Name | | Cate | 11 egory/ | | | | | |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) | 13 | /pe | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | action ID | . 3160 | 1/52 | |
| Swati Dandekar Campaign Committee (Co | omm #1324) | | | Date o | of Disburs | ement | _ | Y |
| Mailing Address 2731 28th Avenue | | 044 / 15 / 2010 | | | | | | |
| City Marion | State Zip Code IA 52302 | | | Amou | nt of Each | Disburse | ement this | Period |
| Purpose of Disbursement Swati Dandekar, STATE SENATE 18th IA | | Ò | 11 | | | | 250.00 |) |
| Candidate Name IA Sen. Swati Dandekar | | Cate | egory/ | | | | | |
| | ement For: 2010 Primary General Other (specify) | | | Swati ATE 1 | Dandek 8th IA | ar, STA ⁻ | TE SEN- | |
| Full Name (Last, First, Middle Initial) Citizens for Gronstal (Comm #1612) | | | | | action ID of Disburs | | 6642 | |
| Mailing Address 220 Bennett Avenue | | | | 0 ^M 4 | M / D | 5 / | [°] 2010 | O Y |
| City Council Bluffs | State Zip Code IA 51503 | | | Amou | nt of Each | Disburse | ement this | Perio |
| Purpose of Disbursement Michael Gronstal, STATE SENATE 50th IA | | 0 | 11 | | | | 200.00 |) |
| Candidate Name Sena Michael Gronstal | Cate | egory/ /pe | | | | | | |
| ° 🗎 – | ement For: 2010 Primary General Other (specify) | | | Micha SENA | el Grons TE 50th | stal, STA IA | ATE | |
| SUBTOTAL of Disbursements This Page (optional) | | | . • | | | • • • | 1450.00 |) |
| TOTAL This Period (last page this line number only) | | | | | - | | - | |
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| | | Use separate schedule(s) | | | INE NUM (only one) | | | | | 46 / 5 | |
|-----------------|---|---|-------------------|---|------------------------|-----------------|--------------------|---------------|-------|-----------|----------------|
| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | _ F | 21 27 | b 22 | - | 23 28b | 24 28 | | 25 29 | |
| | r Information copied from such Reports and Stat or commercial purposes, other than using the na | | | | | | | | | | 5 |
| $\overline{\ }$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| | Property Casualty Insurers Association (CIPAC) | of America Political Action | Com | mitte | e (P- | | | | | | |
| | Full Name (Last, First, Middle Initial) Committee to Elect Matt McCoy (Comm | #703) | | | | | ion ID: | 3160 |)6696 | ; | |
| | Mailing Address 110 35th Street | | | | | 4 M | / 1 | D / | Y Y | o i c |) ^Y |
| | City | State Zip Code | | | An | nount o | f Each | Disbur | semer | nt this f | Period |
| | Des Moines | IA 50312 | | | | | | | | 250.00 | |
| | Purpose of Disbursement Matt McCoy, STATE SENATE 31st IA | | | 011 | 7 | | | | | 50.00 | , |
| | Candidate Name Sena Matt McCoy | | Ca | tegory/ ype | _ | | | | | | |
| | X Senate President | sement For: 2010 X Primary General Other (specify) | 1 | | Ma 31s | tt McC st IA | Coy, S | TATE | SEN | ATE | |
| | State: IA District: | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) McKinley for Iowa (Comm #1269) | | | | | | ion ID: isburse | 3160 ement |)6735 | j | |
| | Mailing Address 21884 483rd Lane | | | | | | / D 1 | D / | Y | 2 o 1 c |) ^Y |
| | City Chariton | State Zip Code IA 50049-0609 | 1 | | An | nount o | f Each | Disbur | semer | nt this F | Perio |
| | Purpose of Disbursement Paul McKinley, STATE SENATE 36th IA | IA 30049-0009 | | 011 | 7 C | | | | 5 | 500.00 |) |
| | Candidate Name Senator Paul McKinley | | Ca | tegory/ ype | _ | | | | | | |
| | ÿ | sement For: 2010 X Primary General Other (specify) ▼ | | <u>, , , , , , , , , , , , , , , , , , , </u> | Pa TE | ıl Mck 36th | Kinley IA | STAT | E SE | :NA- | |
| | Full Name (Last, First, Middle Initial) Olive the Supporters of Rich for Senate | Comm#1645) | | | 1 | | ion ID: | 3160 ement |)6832 | 2 | |
| | Mailing Address 1264 Northridge Road | | | | O O | 4 M | / D 1 | 5 / | Y 2 | 2 0 1 C |) ^Y |
| | City Story City | State Zip Code IA 50248-0247 | , | | An | nount o | f Each | Disbur | semer | ıt this F | Perio |
| | Purpose of Disbursement Rich Olive, STATE SENATE 5th IA | | | 011 | 7 L | | | | 2 | 250.00 |) |
| | Candidate Name IA Sen. Rich Olive | | Category/ Type | | | | | | | | |
| | X Senate President | sement For: 2010 X Primary General Other (specify) | | | Ric 5th | h Oliv IA | ve, ST | ATE S | ENA | ΓΕ | |
| | State: IA District: | | | | | | | | | | |
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| IT _ | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | | 21b 27 | 22 28a | | 23 28b | $oldsymbol{\sqcup}$ | 24 28c | X | 25 29 | 26 |
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| | Property Casualty Insurers Association CIPAC) | of America Political Action | Com | ımi | ttee (P | 0_ | | | | | | | |
| | Full Name (Last, First, Middle Initial) Paulsen for State House Committee (C | omm #1318) | | | | Trans | | on ID: | _ | | 885 | | |
| | Mailing Address P. O. Box 250 | | | | | | M / | D 1 | D | / Y | ž | 0 1 0 | Y |
| | City | State Zip Code | | | | Amoi | ınt of | Fach | Dish | ourse | ment | this P | Period |
| | Hiawatha | IA 52233 | | | | 741100 | | Laon | D131 | 701301 | - | 50.00 | |
| | Purpose of Disbursement Kraig Paulsen, STATE HOUSE 35th IA | | | 011 | | | - | 1 | - | _ | 7.0 | 0.00 | |
| | Candidate Name IA Rep. Kraig Paulsen | | | tego Type | | | | | | | | | |
| | Senate President | xrsement For: 2010 X Primary General Other (specify) | | | | Kraig 35th | Pau A | ılsen | , ST | ATE | HOI | JSE | |
| | State: IA District: 35 Full Name (Last, First, Middle Initial) | | | | | Trans | acti | on ID | . 21 | | 999 | | |
| • | Rielly for Senate (Comm#1516) | | | | | Date | | sburs | emen | | | V | V |
| | Mailing Address 113 North Market Str | et | | | | o ^M 4 | M / | 1 | 5 | L | ž | 0 1 0 | Y |
| | City Oskaloosa | State Zip Code IA 52577 | | | | Amou | int of | Each | Dist | ourse | | this P | |
| | Purpose of Disbursement Thomas Rielly, STATE SENATE 38th IA | | | 011 | | | _ | 1 | | | 25 | 50.00 | |
| | Candidate Name IA Sen. Thomas Rielly | | | tege Type | , | | | | | | | | |
| | X Senate President | x Primary | | | | Thom TE 38 | as F 8th L | Rielly A | , ST | ATE | SEI | NA- | |
| | State: IA District: Full Name (Last, First, Middle Initial) | | | | | T | | ID | 0.4 | | 070 | | |
| • | Soderberg for House (Comm #1492) | | | | | Trans Date | of Di | sburs | emen | | | | _ |
| | Mailing Address 800 2nd Street SE | | | | | 0 ^M 4 | M / | ^D 1 | 5 | / L | ž | 0 1 0 | Y |
| | City LeMars | State Zip Code IA 51031 | | | | Amou | ınt of | Each | Dist | urse | ment | this P | eriod |
| | Purpose of Disbursement Chuck Soderberg, STATE HOUSE 3rd IA | | | 011 | | | | | | | 25 | 0.00 | |
| | Candidate Name IA Rep. Chuck Soderberg | | Ca | - | ory/ | | | | | | | | |
| | Office Sought: X House Disb Senate President | x Primary General Other (specify) | |) F | | Chuc USE | k So 3rd l | derb A | erg, | STA | TEI | HO- | |
| | State: IA District: 03 | (-p)/ V | | | | | | | | | | | |
| _ | State: I/ C Biotriot: 66 | | | | | | | | | | | | |

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| | | SBURSEMEN | | Detailed | category of the Summary Page | | $\dot{\Box}$ | 21b 27 | 22 28a | | 23 28b | П | 24 28c | X | 25 29 | 26 30 |
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| | NAME OF COM | MITTEE (In Full) | | | | | | | | | | | | | | |
| | Property Casua CIPAC) | alty Insurers Asso | ciation of A | America F | Political Action | Con | nmi | ittee (F |)_ | | | | | | | |
| | Full Name (Last, Hugh Holliman | First, Middle Initial) Campaign | | | | | | | Trans Date | | on ID: sburs | _ | | 945 | | |
| ; | Mailing Address | 223 D South M | lain Street | | | | | | 0 ^M 4 | М | ^D 1 | 6 | / Y | ž | 0 1 0 | Y |
| | City Lexington | | | State NC | Zip Code 27292 | | | | Amou | ınt ol | Each | Dist | ourser | ment | this P | eriod |
| | Purpose of Disbu | rsement | | | 27202 | | | - | | | | | | 50 | 0.00 | |
| | Lindsey Holliman, | STATE HOUSE 81 | st NC | | | | 01 ⁻ | 1 | | | | | | | | |
| | Candidate Name Representa Lir | ndsey Holliman | | | | | ateg Typ | ory/ e | | | | | | | | |
| | Office Sought: | X House Senate President | | ment For: Primary Other (spe | 2010 General | | | | Linds HOU | ey F SE 8 | Hollim 11st N | nan, NC | STA | TE | | |
| | State: NC | District: 81 | | | | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Tucker Campaign | | | | | | | | | of Di | sburs | emen | _ | | | |
| | Mailing Address 1206 Rosehill Drive | | | | | | | 0 4 | М | ^D 1 | 6 | / L | ž | 0 ť 0 | Y | |
| | City W axhaw | | State NC | Zip Code 28173 | | | | Amou | ınt of | Each | Disb | urser | | this P | | |
| | Purpose of Disbursement Wyatt Tucker, STATE SENATE 35th NC | | | | | 011 | | 1 | | | | | - | 25 | 50.00 | |
| | Candidate Name Wyatt Thomas | Tucker, Sr. | | | | | ateg Typ | ory/ e | | | | | | | | |
| | Office Sought: | House χ Senate President | | ment For: Primary Other (spe | 2010 General | | | | Wyat 35th | t Tu NC | cker, | STA | ATE S | SEN | ATE | |
| | State: NC | District: | | (-1 | 3 / | | | | | | | | | | | |
| | Full Name (Last, Clark Jenkins (| First, Middle Initial) Campaign | | | | | | | Trans Date | | - | | | 983 | | |
| , | Mailing Address | P. O. Box 310 | | | | | | | 0 ^M 4 | М | ^D 1 | ^D | / Y | ž | 0 ť 0 | Y |
| | City Tarboro | | | State NC | Zip Code 27886 | | | | Amou | ınt of | Each | Dist | urser | ment | this P | eriod |
| | Purpose of Disbursement Clark Jenkins, STATE SENATE 3rd NC | | | | | 011 | | | L. | | | | | 25 | 50.00 | |
| | Candidate Name Cat | | | | | ateg Typ | ory/ | | | | | | | | | |
| | Office Sought: | House X Senate President | 1 11 | ment For: Primary Other (spe | 2010 General | | | | Clark TE 3r | | | STA | ATE S | SEN | IA- | |
| | State: NC | District: | | | | | | | | | | | | | | |
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| S | CHEDULE B (FEC Form 3X) | Use separate schedule(s) |) | FOR LINE | - | PAGE 49 / 54 |
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| П | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | , | (check only | ⁷ one) ☐ 22 | ☐ 24 ☐ 25 ☐ 26 |
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| | ny Information copied from such Reports and Statem for commercial purposes, other than using the nam | | | | | |
| 7 | NAME OF COMMITTEE (In Full) | e and address of any politica | li COII | illillitee to soi | icit contributions from | ii sucii committee |
| | Property Casualty Insurers Association of CIPAC) | America Political Action | Cor | mmittee (P |)_ | |
| ۰. ۵. | Full Name (Last, First, Middle Initial) | | | | Transaction ID: | |
| ٦. | Jerry Dockham Campaign | | | | Date of Disbursen | |
| | Mailing Address P.O.Box 265 | | | | 04 16 | B |
| | , | State Zip Code NC 27239 | | | Amount of Each D | Disbursement this Period |
| | Denton Purpose of Disbursement | NG 2/239 | | | | 250.00 |
| | Jerry Dockham, STATE HOUSE 80th NC | | | 011 | | |
| | Candidate Name Repr Jerry Dockham | | | ategory/ Type | | |
| | | ement For: 2010 Primary General Other (specify) | | | Jerry Dockham, 80th NC | STATE HOUSE |
| _ | State: NC District: 80 | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Bruce Goforth Campaign | | | | Transaction ID: | |
| | | | | Date of Disbursen | | |
| | Mailing Address 1 Cedar Ridge Drive | | | | 0 4 1 6 | 2010 |
| | City Asheville | State Zip Code NC 28803 | | | Amount of Each D | Disbursement this Period |
| | Purpose of Disbursement D. Goforth, STATE HOUSE 115th NC | | 011 | | 250.00 | |
| | Candidate Name NC Rep. D. Goforth | | | ategory/ Type | | |
| | | ement For: 2010 Primary General Other (specify) | • | | D. Goforth, STA 115th NC | TE HOUSE |
| C. | Full Name (Last, First, Middle Initial) | | | | Transaction ID: | |
| <i>)</i> . | DeLuca for Legislator Committee | | | | Date of Disbursen | |
| | Mailing Address 1438 Homestead Road | | | | 04 | 2 2010 |
| | City Verona | State Zip Code PA 15147 | | | Amount of Each D | Disbursement this Period |
| | Purpose of Disbursement Anthony DeLuca, STATE HOUSE 32nd PA | | 011 | | 500.00 | |
| | Candidate Name Representa Anthony DeLuca | | ategory/ Type | | | |
| | Senate President | ement For: 2010 Primary X General Other (specify) | | | Anthony DeLuca SE 32nd PA | a, STATE HOU- |
| _ | State: PA District: 32 | | | | | |
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| S | CHEDULE B (FEC Form 3X) | Use sepa | arate schedule(s) | | FOR LINE | - | Р | AGE 50/ | 54 |
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| | y Information copied from such Reports and Statem | | | | any person f | or the purpose o | soliciting | contribution | is |
| or | for commercial purposes, other than using the name | e and addres | ss of any political | com | imittee to sol | icit contributions | from such | committee | ! |
| \rangle | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association of CIPAC) | America P | Political Action | Con | nmittee (F |) ₋ | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Transaction | D : 3166 | 8409 | |
| | Marco Rubio For US Senate | | | | | Date of Disbu | | Y Y Y | Υ |
| | Mailing Address 2030 South Douglas Roa | nd Suite 10 | 05 | | | 0 4 | 23 / | žož | 0 |
| | City Coral Gables | State FL | Zip Code 33134 | | | Amount of Ea | ch Disburs | | |
| | Purpose of Disbursement Void - Marco Rubio For Us Senate | | | | 011 | | | -5000.0 | Ü |
| | Candidate Name Mr. Marco Rubio | | | | ategory/ Type | | | | |
| | X Senate X President | ement For: Primary Other (spe | 2010 General | | | Void - Marco Senate | Rubio F | or Us | |
| _ | State: FL District: | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Citizens For Altmire | | | | | Transaction Date of Disbu | | 0917 | |
| | Mailing Address P.O. Box 1776 | | | | | 04 | 28 / | y žo j | 0 ^Y |
| | City Freedom | State PA | Zip Code 15042 | | | Amount of Ea | ch Disburs | ement this | Period |
| | Purpose of Disbursement | | | | 011 | | | 1000.0 | 0 |
| | Candidate Name Rep. Jason Altmire | | | | ategory/ Type | | | | |
| | | ement For: Primary Other (spe | 2010 General | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Transaction | ı n ∙ 3167 | 1097 | |
| | Geoff Davis for Congress | | | | | Date of Disbu | | | V |
| | Mailing Address 700 12th Street NW Suite 700 | | | | | 0 4 | 28 | Ý ŽO Ì | 0 |
| | City Washington | State DC | Zip Code 20005 | | | Amount of Ea | ch Disburs | ement this | Period |
| | Purpose of Disbursement | | 011 | | | 1000.0 | 0 | | |
| | Candidate Name Mr. Geoffrey Davis | | ategory/ Type | | | | | | |
| | Senate X President | ement For: Primary Other (spe | 2010 General | <u> </u> | | | | | |
| _ | State: KY District: 04 | | | | | | | | |
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| SCHEDULE B (FEC FOIII 3X) | Use separate schedule(s) | (check only | NUMBER: PAGE 51 / 54 |
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| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | 21b 27 | 22 X 23 24 25 28a 28b 28c 29 |
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| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association (CIPAC) | · | | |
| Full Name (Last, First, Middle Initial) Texans For Lamar Smith | | | Transaction ID: 31671140 Date of Disbursement |
| Mailing Address PO Box 6155 | | | $\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$ |
| City San Antonio | State Zip Code TX 78209 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | 011 | 1000.00 |
| Candidate Name Rep. Lamar Smith | | Category/ Type | |
| Senate President | rsement For: 2010 Primary X General Other (specify) | | |
| State: TX District: 21 | | | |
| Full Name (Last, First, Middle Initial) Bachus for Congress | | | Transaction ID: 31671234 Date of Disbursement |
| Mailing Address P O Box 59444 | | | $\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D & D \\ D & E & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D & M \end{smallmatrix} \end{bmatrix}$ |
| City Birmingham | State Zip Code AL 35259-9444 | | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | | 011 | 1000.00 |
| Candidate Name Representa Spencer Bachus, III | | Category/ Type | |
| Office Sought: X House Disbu Senate President | rsement For: 2010 Primary X General Other (specify) | | |
| State: AL District: 06 Full Name (Last, First, Middle Initial) | | | T |
| Friends of Blanche Lambert Lincoln | | | Transaction ID: 31671755 Date of Disbursement |
| Mailing Address PO Box 3197 | | | $\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ & 2 & 8 \end{smallmatrix} & \begin{smallmatrix} M & Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{smallmatrix}$ |
| City Little Rock | State Zip Code AR 72203-3197 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | 011 | 3000.00 |
| Candidate Name Sena Blanche Lincoln | | Category/ Type | |
| Office Sought: House Disbu X Senate President | rsement For: 2010 Primary X General Other (specify) | | |
| State: AR District: | | | |
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| | Information copied from such Reports and State or commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Property Casualty Insurers Association of CIPAC) | ne and addre | ss of any political | com | mitt | person t | or the pu | | e of s | olicitir | ng cor | ntributio | ons | _ |
| | Full Name (Last, First, Middle Initial) Reed Committee Mailing Address PO Box 8628 | | | | | | Date | | on ID sburs | _ | | 92 Ž0 | ĺOŤ | |
| | City Cranston Purpose of Disbursement | State RI | Zip Code 02920-0628 | _ | _ | | Amou | ınt o | f Each | n Disb | - | nent thi | - | ioc |
| | Candidate Name Sena Jack Reed | sement For: | 2014 X General | Ca | 01 ⁻ ateg Typ | ory/ | | | | | | | | |
| | State: RI District: Full Name (Last, First, Middle Initial) Heartland Values PAC Mailing Address P.O. Box 505 | Other (spe | ecify) | | | | | | sburs | _ | | 006 2 0 | ín | 1 |
| | City Sioux Falls | State SD | Zip Code 57101 | | | | | ınt o | | | | nent thi | s Per | |
| | Purpose of Disbursement Candidate Name | | | Ca | 01 ⁻ ateg | ory/ | L. | | • | • | • | 5000. | υů | - |
| | Office Sought: House Disburs | ement For: Primary Other (spe | General ecify) ▼ | | . , , , | 5 | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Marco Rubio For US Senate | | | | | | | of D | sburs | emen | | | | |
| | Mailing Address 2030 South Douglas Road Suite 105 | | | | | | 0 ^M 4 | M | D 2 | 2 8 2 8 | / L | ž 0 ³ | 0 1 | |
| | City Coral Gables | State FL | Zip Code 33134 | | | | Amou | ınt o | f Each | n Disb | - | nent thi | - | io |
| | Purpose of Disbursement Candidate Name Mr. Marco Rubio | | | Ca | 01 ateg Typ | ory/ | L. | | | | ^ | | - | - |
| | | sement For: C Primary Other (spe | 2010 General ecify) | | | | | | | | | | | |
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| NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | of America Political Action | Committee (P | - |
| Full Name (Last, First, Middle Initial) AMERIPAC Mailing Address 499 South Capitol St. | SW-Ste 414 | | Transaction ID: 31672147 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | | Amount of Each Disbursement this Period |
| Washington | DC 20003 | | 2500.00 |
| Purpose of Disbursement Candidate Name | | 011 Category/ | 2300.00 |
| Office Sought: House Disb Senate President State: District: | ursement For: Primary General Other (specify) | Туре | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 31672292 |
| | | | Date of Disbursement O 4 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address PO Box 233 | | | 04 28 2010 |
| City Nashua | State Zip Code NH 03061 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Candidate Name Kelly Ayotte | | 011 Category/ Type | 1000.00 |
| Office Sought: House X Senate President State: NH District: | ursement For: 2010 X Primary General Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) Jim Risch For U S Senate Committee | | | Transaction ID: 31672402 Date of Disbursement |
| Mailing Address 407 W Jefferson Stre | et | | $\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & B \\ & 2 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & & Y & 2 & 0 & 1 & 0 \\ & & 2 & 0 & 1 & 0 \end{bmatrix}$ |
| City Boise | State Zip Code ID 83702 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | 011 | 2500.00 |
| Candidate Name James Risch | | Category/ Type | |
| X Senate President | ursement For: 2014 Primary X General Other (specify) | | |
| State: ID District: | | | 6000.00 |
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| \rangle | NAME OF COMMITTEE (In Full) Property Casualty Insurers Association CIPAC) | n of America Political Action Co | ommittee (P | - |
| | Full Name (Last, First, Middle Initial) Friends of Schumer Mailing Address 1551 East 23rd Street | et | | Transaction ID: 31672403 Date of Disbursement M M M / D 2 B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Brooklyn Purpose of Disbursement Candidate Name | State Zip Code NY 11210 | 011 Potogov/ | Amount of Each Disbursement this Period 1000.00 |
| | Sena Charles Schumer | oursement For: 2010 Primary X General Other (specify) | Category/ Type | |
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