Image# 14950011423 PAGE 1 / 10

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

TOTAL PA	or Other Than An	Authorized	Committee			Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typir r the lines.	ig, type	12FE4M5	
Selective Insurance Co	mpany of Ameri	ca Politica	Action C	ommittee	; 	
ADDRESS (number and street)	40 Wantage Ave					
Check if different						
than previously reported. (ACC)	Branchville				NJ	07890
2. FEC IDENTIFICATION NUI	MBER ▼	CITY 🛦		5	STATE A	ZIP CODE ▲
C C00550889		3. IS THIS REPORT	\sim	IEW N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	× Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		lun 20 (M6)	-	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) (-) -	Apr 20 (M4)		lul 20 (M7)	. —	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	(C) 12-Day		Primary (12P Convention (General (
October 15 Quarterly Report (Q3	·		Convention (.20)	opoolai (
January 31 Year-End Report (YE	<u> </u>	Election on	M = M /	D D /	Y 1 Y 1 Y 1 Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Elec		General (30G	i)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Report for	Election on	M = M /	D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 07		y y y y 2014	through	07_	/ 31 /	2014
I certify that I have examined this Type or Print Name of Treasurer	Report and to the b	est of my know	wledge and b	pelief it is tru	e, correct and	d complete.
	F. Beck		[Electronically	Filed] D	ate 08	/ D D / Y Y Y Y Y Y 2014
NOTE: Submission of false, erroned	ous, or incomplete info	rmation may su	bject the pers	son signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Selective Insurance Company of America Political Action Committee 2014 07 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1767.30 January 1, 2014 (b) Cash on Hand at 4084.56 Beginning of Reporting Period..... 9998.02 680.76 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 4765.32 11765.32 6(a) and 6(c) for Column B)..... 0.00 7000.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 4765.32 4765.32 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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)

Write or Type Committee Name

Selective Insurance Company of America Political Action Committee

Report	t Covering the Period: From:	01 2014	To: 07 / 31 / 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Cor (a)	ntributions (other than loans) From: Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	680.76	8482.64
	(ii) Unitemized(iii) TOTAL (add	0.00	1515.38
	Lines 11(a)(i) and (ii)	680.76	9998.02
(b)	Political Party Committees Other Political Committees	0.00	0.00
(d)	(such as PACs) Total Contributions (add Lines	0.00	0.00
10 Tro	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶ nsfers From Affiliated/Other	680.76	9998.02
	ty Committees	0.00	0.00
13. All	Loans Received	0.00	0.00
15. Offs	n Repayments Receivedests To Operating Expenditures	0.00	0.00
(Ca	funds, Rebates, etc.) rry Totals to Line 37, page 5) unds of Contributions Made	0.00	0.00
Poli	Federal Candidates and Other tical Committees	0.00	0.00
(Div	er Federal Receipts vidends, Interest, etc.)	0.00	0.00
	nsfers from Non-Federal and Levin Funds Non-Federal Account (from Schedule H3)	0.00	0.00
/I= \		0.00	0.00
	Levin Funds (from Schedule H5)		
(c)	Total Transfers (add 18(a) and 18(b))	0.00	0.00
	al Receipts (add Lines 11(d), 13, 14, 15, 16, 17, and 18(c))▶	680.76	9998.02
	al Federal Receipts otract Line 18(c) from Line 19)▶	680.76	9998.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I Cilou	Calcinual Teal-to-Date
	(i) Federal Share	0.00	0.00
	()		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	5000.00
	Independent Expenditures		
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	(use Schedule F)	7	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:	7	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	Other Disbursements	0.00	2000.00
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(7)		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	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))	0.00	7000.00
	. , , , , , , - , - , - , - , - , - , -	7	7500.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0.00	7000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	680.76	9998.02	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	680.76	9998.02	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPT

FOR LINE NUMBER: PAGE 6 OF

/									
	Use separate schedule(s)	(check only one)							
5	for each category of the Detailed Summary Page	X 11a		11b	11c	12			
			13	14	15	16	17		
such Baparts and Statements may not be sold or used by any parson for the number of soliciting contributions									

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee or solicit contributions from such committee or solicit contributions from such committee.

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Selective Insurance Company o	f America Political Action Commit	tee
Α.	Full Name (Last, First, Middle Initial) Allen Anderson Mailing Address 2 Windy Brow Mnr		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City Newton FEC ID number of contributing federal political committee.	State Zip Code NJ 07860-5381	Transaction ID: F874E4C8342044948F2C Amount of Each Receipt this Period 38.46
	Name of Employer Selective Insurance Company of America Receipt For: Primary General	Occupation Aggregate Year-to-Date ▼ 307.68	
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Allen Anderson Mailing Address 2 Windy Brow Mnr City Newton FEC ID number of contributing federal political committee. Name of Employer	State Zip Code NJ 07860-5381 C	Date of Receipt 07 25 2014 Transaction ID: ABA9A0EEC7E04B9382DE Amount of Each Receipt this Period 38.46
	Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
-	Full Name (Last, First, Middle Initial) Jeffrey Beck Mailing Address 4 Whitefield Dr City Lafayette Hill FEC ID number of contributing federal political committee. Name of Employer Selective Insurance Company of America Receipt For: Primary General Other (specify)	State Zip Code PA 19444-1648 C Occupation SVP, Government and Regulatory Affairs Aggregate Year-to-Date ▼ 1153.80	Date of Receipt O7 11 2014 Transaction ID: 7624E02D415E4D978F69 Amount of Each Receipt this Period 76.92
S	SUBTOTAL of Receipts This Page (optional)	_	153.84
Т	OTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 10 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Selective Insurance Company of America Political Action Committee Full Name (Last, First, Middle Initial) Jeffrey Beck Date of Receipt Mailing Address 4 Whitefield Dr 2014 25 City Zip Code State Transaction ID: 4A0E352476D94075A8FD PΑ Lafayette Hill 19444-1648 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Name of Employer Occupation Selective Insurance Company of America SVP, Government and Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 1153.80 Other (specify) Full Name (Last, First, Middle Initial) B. Sarita Chakravarthi Date of Receipt Mailing Address 648 S Brooksvale Rd 07 2014 11 City State Zip Code Transaction ID: A733746C0ED04FA8903C CT Cheshire 06410-3517 Amount of Each Receipt this Period FEC ID number of contributing 23.08 federal political committee. Name of Employer Occupation Selective Insurance Company of America SVP, Tax & Assitant Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 346.20 Other (specify) Full Name (Last, First, Middle Initial) **c.** Sarita Chakravarthi Date of Receipt Mailing Address 648 S Brooksvale Rd 25 2014 City State Zip Code Transaction ID: 03C2B8161FC4444E8DBB CT Cheshire 06410-3517 Amount of Each Receipt this Period FEC ID number of contributing 23.08 С federal political committee. Name of Employer Occupation SVP, Tax & Assitant Treasurer Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 346.20 Other (specify) 123.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

	FOR LINE	NUMBER	: PAGI	Ξ 8	OF
Use separate schedule(s)	(check only	/ one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	13	2
,	13	14	15	1	6

10

NAME OF COMMITTEE (In Full)	of America Political Action Commi	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas Clark Mailing Address 8904 Rams Crossing Ct		Date of Receipt
		07 11 2014
City North Chesterfield	State Zip Code VA 23236-1388	Transaction ID: 6088A990BB9F4ED9AEC Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Selective Insurance Company of America Receipt For: Primary General	Occupation SVP, Claims General Counsel Aggregate Year-to-Date ▼	-
Other (specify)	375.00	
Full Name (Last, First, Middle Initial) Thomas Clark		Date of Receipt
Mailing Address 8904 Rams Crossing Ct City	State Zip Code	07 25 2014 Transaction ID : AEBEDD621BF44217903
North Chesterfield FEC ID number of contributing federal political committee.	VA 23236-1388	Amount of Each Receipt this Period 25.00
Name of Employer Selective Insurance Company of America	Occupation SVP, Claims General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Stephen Crosta		Date of Receipt
Mailing Address 54 Lee Rd		07 11 _ 2014 _
City Livingston	State Zip Code NJ 07039-4134	Transaction ID : 2E3D278C4A3946B1A4C Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer	Occupation	_
Selective Insruance Company of America Receipt For:	VP, Assistant General Counsel	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44	
SUBTOTAL of Receipts This Page (optional)		88.46
	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NOMB (check only one)

FOR LINE NUMBER:					PAGE	:	9	OF	10	
(c	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16	;	17

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Selective Insurance Company	y of America Political Action Commi	ttee
Full Name (Last, First, Middle Initial) A. Stephen Crosta		Date of Receipt
Mailing Address 54 Lee Rd		07 25 2014
City Livingston	State Zip Code NJ 07039-4134	Transaction ID: 53E87C6C83ED44B19163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Selective Insruance Company of America	Occupation VP, Assistant General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44	
Full Name (Last, First, Middle Initial) Michael Lanza Mailing Address Bo Bo Address		Date of Receipt
Mailing Address PO Box 1495 City	State Zip Code	07 11 2014 Transaction ID : D535DA9CC7C8433AB4D6
Sparta FEC ID number of contributing federal political committee.	NJ 07871-5495	Amount of Each Receipt this Period 100.00
Name of Employer Selective Insurace Company of America	Occupation EVP, General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) C. Michael Lanza		Date of Receipt
Mailing Address PO Box 1495		07 25 2014
City Sparta	State Zip Code NJ 07871-5495	Transaction ID : D519BF056CEA4D508F01 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Selective Insurace Company of America	Occupation EVP, General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional)	·····	238.46
	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 10 OF 10 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Selective Insurance Company of America Political Action Committee Full Name (Last, First, Middle Initial) George Neale Date of Receipt Mailing Address 10029 Daufuskie Dr 2014 City Zip Code State Transaction ID: 3B3AD5832E42473AB809 NC Charlotte 28278-9041 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Name of Employer Occupation SVP, Chief Claims Officer Selective Insurance Company of America Receipt For: Aggregate Year-to-Date ▼ Primary General 576.90 Other (specify) Full Name (Last, First, Middle Initial) **B.** George Neale Date of Receipt Mailing Address 10029 Daufuskie Dr. 07 25 2014 City State Zip Code Transaction ID: D35746960AEA420EBA41 NC Charlotte 28278-9041 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Name of Employer Occupation Selective Insurance Company of America SVP, Chief Claims Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 576.90 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 76.92 SUBTOTAL of Receipts This Page (optional)..... 680.76 TOTAL This Period (last page this line number only).....