

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Michael Campbell


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

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)
Write or Type Committee Name
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE


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

Write or Type Committee Name
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

| I. Receipts |
| :--- |
| Report Covering the Period: From: |

19. Total Receipts (add Lines 11(d),
$12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots \ldots$
6036.00

| 13086.50 |
| :---: | :---: |
| -13086.50 |

20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $>$


FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))

## )

. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made........................
(a) Individuals/Persons Other Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs). $\qquad$
$\qquad$
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$

| 0 | 0.00 |
| :--- | :--- |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$ ....
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
.... $\downarrow$

COLUMN A Total This Period

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | , 0.00 |
|  | 0.00 |
|  | , 0.00 |


| 12000.00 |  |
| :---: | :---: |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

$0,0.00$

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | ,$\quad 0.00$ |


|  | 0.00 |
| :---: | :---: |
|  | , 0.00 |
|  | , 0.00 |
|  | , 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | , 0.00 |
|  | , 0.00 |

31. Total Disbursements (add Lines 21 (c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

12000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).............................................


DETAILED SUMMARY PAGE
of Disbursements

Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ...... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$ !

COLUMN A
Total This Period

COLUMN B Calendar Year-to-Date


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

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

FOR LINE NUMBER:
PAGE 6 OF


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 7 Carry Lane |  |
| :---: | :---: |
| City | State Zip Code |
| Melville | NY 11747-3903 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| GEICO | RVP Reg. 2 |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| $\square$ Other (specify) $\nabla$ | 270.00 |

Date of Receipt


Transaction ID : SA11AI. 23053
Amount of Each Receipt this Period
$\square 60.00$

Payroll deduction $\$ 30.00$ biweekly

| Full Name (Last, First, Middle Initial) |
| :--- |
| B. Seth M. Ingall |
| Mailing Address 7 Carry Lane |
| City |
| Melville |
| FEC ID number of contributing |
| federal political committee. |
| Name of Employer State Zip Code <br> GEICO   |
| Receipt For: C  <br> $\square$Primary <br> Other (specify) $\boldsymbol{\nabla}$ General RVP Reg.2 |

Date of Receipt


Transaction ID : SA11AI. 23164
Amount of Each Receipt this Period
$\square 60.00$

Payroll deduction $\$ 30.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23272
Amount of Each Receipt this Period
60.00

Payroll deduction $\$ 30.00$ biweekly


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

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

FOR LINE NUMBER: $\quad$ PAGE 7 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 1419 Idlewild Blvd |  |
| :---: | :---: |
| City Fredericksburg | State Zip Code <br> VA $22401-6629$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation VP |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23054
Amount of Each Receipt this Period
50.00

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23165
Amount of Each Receipt this Period
$\square 50.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23273
Amount of Each Receipt this Period


Payroll deduction $\$ 25.00$ biweekly
$\square, 150.00$

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

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

FOR LINE NUMBER: PAGE 8 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 3495 Pleasant Grove Drive |  |
| :---: | :---: |
| City ljamsville | State Zip Code <br> MD $21754-9034$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation Director |
|  | Aggregate Year-to-Date $\square$ <br> 220.00 |

Date of Receipt


Transaction ID : SA11AI. 23173
Amount of Each Receipt this Period
$\square 40.00$

Payroll deduction $\$ 20.00$ biweekly

| Full Name (Last, First, Middle Initial) <br> B. Paul Lavrey |  |
| :---: | :---: |
| Mailing Address 3495 Pleasant Grove Drive |  |
| City <br> ljamsville | State Zip Code <br> MD $21754-9034$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> Director |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23281
Amount of Each Receipt this Period
$\square-40.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23067
Amount of Each Receipt this Period


Payroll deduction $\$ 25.00$ biweekly

| $\square$ | 130.00 |
| :--- | :--- | :--- |

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

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

FOR LINE NUMBER:
PAGE 9 OF


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. Scott Edward Markel |  |
| :---: | :---: |
| Mailing Address 514 Waverly Park Drive |  |
| City | State Zip Code |
| Macon | GA 31210-7571 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> Reg VP |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23179
Amount of Each Receipt this Period
$\square \quad 50.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23287
Amount of Each Receipt this Period
$\square 50.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23185
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly
$0,140.00$

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

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

FOR LINE NUMBER: PAGE 10 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 19218 Tattershall Drive |  |  |
| :---: | :---: | :---: |
| City | State | Zip Code |
| Germantown | MD | 20874-6246 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer GEICO | Occupat |  |
|  | VP |  |
| Receipt For: | Aggreg | r-to-Date V |
| Other (specify) |  |  |

Date of Receipt

| M.M |  |
| :---: | :---: | :---: | :---: |
| 06 | D |
| 20 | 2012 |

Transaction ID : SA11AI. 23293
Amount of Each Receipt this Period
$\square \quad 40.00$

Payroll deduction $\$ 20.00$ biweekly

## Full Name (Last, First, Middle Initial)

B. Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

| City <br> Tucson | State Zip Code <br> AZ $85748-3279$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> Reg Liab Director |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23188
Amount of Each Receipt this Period
$\square 40.00$

Payroll deduction $\$ 20.00$ biweekly

## Full Name (Last, First, Middle Initial)

C. Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

| City <br> Tucson | State Zip Code <br> AZ $85748-3279$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> Reg Liab Director |
|  | Aggregate Year-to-Date $\square$ <br> 260.00 |

Date of Receipt


Transaction ID : SA11AI. 23296
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................ | $120.00$ |
| :---: | :---: |
| 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 11 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Full Name (Last, First, Middle Initial)
B. Robert Miller

Mailing Address 3025 Amherst Avenue

| City | State Zip Code |
| :---: | :---: |
| Dallas | TX 75225-7808 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation Regional VP |
|  | Aggregate Year-to-Date $260.00$ |

Full Name (Last, First, Middle Initial)
C. Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

| City <br> Great Falls | State <br> VA | Zip Code <br> $22066-2719$ |
| :--- | :---: | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation <br> GeICO | President-Insurance operations |

Date of Receipt


Transaction ID : SA11AI. 23189
Amount of Each Receipt this Period
$\square 40.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23297
Amount of Each Receipt this Period
$\square 40.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt

| 04 | $\begin{array}{\|c\|} \hline D \quad D \\ 26 \end{array}$ | $2012$ |
| :---: | :---: | :---: |

Transaction ID : SA11AI. 23083
Amount of Each Receipt this Period
200.00

Payroll deduction $\$ 100.00$ biweekly
280.00

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

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

FOR LINE NUMBER: PAGE 12 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. Olza Nicely |  |
| :---: | :---: |
| Mailing Address 805 Nethercliffe Hall Road |  |
| City Great Falls | State Zip Code <br> VA $22066-2719$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> President-Insurance operations |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt


Transaction ID : SA11AI. 23195
Amount of Each Receipt this Period
200.00

Payroll deduction $\$ 100.00$ biweekly


Date of Receipt


Transaction ID : SA11AI. 23303
Amount of Each Receipt this Period
200.00

Payroll deduction $\$ 100.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23090
Amount of Each Receipt this Period


Payroll deduction $\$ 40.00$ biweekly

| 0 | 480.00 |
| :--- | :--- |

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

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

FOR LINE NUMBER: PAGE 13 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. Nancy Leigh Pierce |  |
| :---: | :---: |
| Mailing Address 100 Queen Street |  |
| City <br> Alexandria | State Zip Code <br> VA $22314-2611$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation VP |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23202
Amount of Each Receipt this Period
$\square$

Payroll deduction $\$ 40.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23310
Amount of Each Receipt this Period
$\square 80.00$

Payroll deduction $\$ 40.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23093
Amount of Each Receipt this Period


Payroll deduction $\$ 25.00$ biweekly

| -210.00 |
| :--- | :--- | :--- |

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

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

FOR LINE NUMBER: PAGE 14 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 23205
Amount of Each Receipt this Period
50.00

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23313
Amount of Each Receipt this Period
$\square 50.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23206
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly
$\square, 140.00$

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

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

FOR LINE NUMBER: PAGE 15 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 924 Beacon Square Court \#326 |  |
| :---: | :---: |
| City <br> Gaithersburg | State Zip Code <br> MD 20878-5433 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation AVP |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $06$ | $\begin{gathered} D \quad D \\ 20 \end{gathered}$ | $2012$ |
| :---: | :---: | :---: |

Transaction ID : SA11AI. 23314
Amount of Each Receipt this Period
$\square \quad 40.00$

Payroll deduction $\$ 20.00$ biweekly

| Mailing Address 708 STILLWATER ROAD |  |
| :---: | :---: |
| City | State Zip Code |
| GIBSON ISLAND | MD 21056-1133 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation VP |
| Receipt For: $\square$ Primary $\square$ General $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23101
Amount of Each Receipt this Period

$$
250.00
$$

Payroll deduction $\$ 125.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23210
Amount of Each Receipt this Period
250.00

Payroll deduction $\$ 125.00$ biweekly
$0,540.00$

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

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

FOR LINE NUMBER: PAGE 16 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Full Name (Last, First, Middle Initial)
B. Donald W Robinson

Mailing Address 4062 Grandefield Circle
$\left.\begin{array}{l|ll}\hline \text { City } & \text { State } & \begin{array}{l}\text { Zip Code } \\ \text { Mulberry }\end{array} \\ \hline \text { FEC ID number of contributing } & \text { FL } & \\ \text { 33860-6566 }\end{array}\right]$

Full Name (Last, First, Middle Initial)
C. Donald W Robinson

Mailing Address 4062 Grandefield Circle

| City <br> Mulberry | State <br> FL | Zip Code <br> $33860-6566$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| GEICO | AVP |  |

Date of Receipt


Transaction ID : SA11AI. 23319
Amount of Each Receipt this Period
$\square 250.00$

Payroll deduction $\$ 125.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23211
Amount of Each Receipt this Period
$\square 40.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23320
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly
$0,330.00$

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

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

FOR LINE NUMBER: PAGE 17 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 15572 Pinehurst PI |  |
| :---: | :---: |
| City <br> San Diego | State Zip Code <br> CA $92131-4310$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation <br> AVP |
|  | Aggregate Year-to-Date <br> 220.00 |

Date of Receipt

| 05 | $24$ | , | $2012$ |
| :---: | :---: | :---: | :---: |

Transaction ID : SA11AI. 23219
Amount of Each Receipt this Period
$\square \quad 40.00$

Payroll deduction $\$ 20.00$ biweekly


Date of Receipt


Transaction ID : SA11AI. 23328
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23120
Amount of Each Receipt this Period


Payroll deduction $\$ 25.00$ biweekly
$\square, 130.00$

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

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

FOR LINE NUMBER: PAGE 18 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 23229
Amount of Each Receipt this Period
$\square \quad 50.00$

Payroll deduction $\$ 25.00$ biweekly

| B. Joseph Thomas |  |
| :---: | :---: |
| Mailing Address 1708 Dalwood Meadows |  |
| City | State Zip Code |
| Virginia Beach | VA 23455-4369 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer GEICO | Occupation AVP |
| Receipt For: $\square$ Primary $\square$ General $\square$ Other (specify) $\mathbf{v}$ | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 23338
Amount of Each Receipt this Period
50.00

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 23238
Amount of Each Receipt this Period
40.00

Payroll deduction $\$ 20.00$ biweekly
$0,140.00$

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

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

FOR LINE NUMBER: PAGE 19 OF 21 (check only one)


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

NAME OF COMMITTEE (In Full)

## GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 20 \end{gathered}$ | ' | $2012$ |
| :---: | :---: | :---: | :---: |

Transaction ID : SA11AI. 23348
Amount of Each Receipt this Period
$\square \quad 40.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Amount of Each Receipt this Period
$\square$

Date of Receipt


Amount of Each Receipt this Period
$\square$

|  | 40.00 |
| :---: | :---: |
|  | 3010.00 |

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



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) <br> GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. COMMON VALUES PAC

| Mailing Address 901 N WASHINGTON ST SUITE 102 |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> ALEXANDRIA |  | State Zip Code <br> VA 22314 |  |
|  |  |  |  |
| Purpose of Dis Campaign Co | sement ution |  | 011 |
| Candidate Nam COMMON | ALUES PA |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Full Name (Last, First, Middle Initial)
B. FRIENDS OF DENNIS ROSS


Full Name (Last, First, Middle Initial)
c. FRIENDS OF DENNIS ROSS

| Mailing Address PO BOX 7310 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| City <br> LAKELAND <br> Purpose of Disbursement Campaign Contribution |  |  |  | State Zip Code <br> FL 33807 |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | 011 |
| Candidate Name FRIENDS OF DENNIS ROSS |  |  |  |  |  |  | Category/ Type |
| Office <br> State | FL |  |  |  |  |  |  |

Date of Disbursement

| $\begin{gathered} M 4 \\ 05 \end{gathered}$ | ' | 15 |  | $2012$ |
| :---: | :---: | :---: | :---: | :---: |

Transaction ID : SB23.23241

Amount of Each Disbursement this Period
$\square 1000.00$

| SUBTOTAL of Disbursements This Page (optional)........................................................ | $4000.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)....................................................... | - , - , - . |

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



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) <br> GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

## Full Name (Last, First, Middle Initial)

A. LINDA LINGLE SENATE COMMITTEE


Date of Disbursement

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


| City |  | State Zip Code |  |
| :---: | :---: | :---: | :---: |
| Purpose of Disbursement |  |  |  |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Amount of Each Disbursement this Period $\square$,

| SUBTOTAL of Disbursements This Page (optional) | 1000.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only).................................................... | 5000.00 |

