

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

ADDRESS (number and street) 471 E BROAD ST
 Check if different than previously reported. (ACC) COLUMBUS OH 43215

2. **FEC IDENTIFICATION NUMBER** C00336834
CITY COLUMBUS **STATE** OH **ZIP CODE** 43215

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
 (a) Quarterly Reports:
 April 15 Quarterly Report(Q1) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 July 15 Quarterly Report(Q2) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 October 15 Quarterly Report(Q3) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
 X January 31 Quarterly Report(YE) Election on in the State of
 July 31 Mid-Year Report(Non-election Year Only) (MY) (d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)
 Termination Report (TER) Election on in the State of

5. Covering Period 07 01 2001 through 12 31 2001

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 Wiseman

Signature of Treasurer Electronically Filed by Michael Wiseman Date 01 22 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^h07 ^D01 ^v2001 To: ^h12 ^D31 ^v2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2001		2869.69
(b) Cash on Hand at Beginning of Reporting Period	3365.57	
(c) Total Receipts (from Line 19)	8431.52	16215.34
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11797.09	19095.03
7. Total Disbursements (from Line 30)	7171.46	14459.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4625.63	4625.63
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

Toll Free 800-420-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^h07 ^d01 ^y2001 To: ^h12 ^d31 ^y2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6884.00	
(ii) Unitemized	1469.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8353.00	16004.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	8353.00	16004.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	100.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	78.52	111.34
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	8431.52	16215.34
20. Total Federal Receipts (subtract Line 18 from Line 19)	8431.52	16215.34

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	221.46	248.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	221.46	248.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
24. Independent Expenditure (use Schedule E).....	0.00	260.94
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	6450.00	13450.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	7171.46	14459.40
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	7171.46	14459.40
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	8353.00	16004.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	8353.00	16004.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	221.46	248.46
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	100.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	221.46	148.46

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

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

FOR LINE NUMBER: PAGE 5 / 20

(check only one)

11a 11b 11c 12
13 14 15 16 17

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

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)

A. John Bishop

Mailing Address

1390 Picardae Court

City

State

Zip Code

Powell

OH

43065

Date of Receipt

N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period

850.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

President and COO

Payroll deduction \$50 bi-
weekly

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

1300.00

Transaction ID: SA11A1.4613

Full Name (Last, First, Middle Initial)

B. John Coffman

Mailing Address

7042 Tralee Drive

City

State

Zip Code

Dublin

OH

43017

Date of Receipt

N M / D E / Y Y Y Y
10 / 26 / 2001

Amount of Each Receipt this Period

135.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Manager

Payroll deduction \$15 bi-
weekly

Receipt For:

2001

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

330.00

Transaction ID: SA11A1.4619

Full Name (Last, First, Middle Initial)

C. John Coffman

Mailing Address

7042 Tralee Drive

City

State

Zip Code

Dublin

OH

43017

Date of Receipt

N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period

68.00

FEC ID number of contributing
federal political committee.

Name of Employer

Motorists Mutual Insurance Company

Occupation

Manager

Payroll deduction \$17 bi-
weekly

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

398.00

Transaction ID: SA11A1.4620

SUBTOTAL of Receipts This Page (optional) ▶

853.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

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

Mailing Address
 6323 Cook Road

City State Zip Code
 Powell OH 43065

Date of Receipt
 N M / D E / Y Y Y Y
 11 09 2001

Amount of Each Receipt this Period
 200.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll deduction \$20 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Transaction ID: SA11A1.4626

B. Full Name (Last, First, Middle Initial)
 Daniel Crawford

Mailing Address
 6323 Cook Road

City State Zip Code
 Powell OH 43065

Date of Receipt
 N M / D E / Y Y Y Y
 12 31 2001

Amount of Each Receipt this Period
 75.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll decution \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 535.00

Transaction ID: SA11A1.4627

C. Full Name (Last, First, Middle Initial)
 Mr. Robert Downes

Mailing Address
 212 Ballman Road

City State Zip Code
 Reynoldsburg OH 43066

Date of Receipt
 N M / D E / Y Y Y Y
 11 05 2001

Amount of Each Receipt this Period
 300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Cash contribution

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.4683

SUBTOTAL of Receipts This Page (optional) ▶ **575.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE 7 / 20		
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Craig Eberwine

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____
1428 Sedgefield Dr. _____
City _____ State _____ Zip Code _____
New Albany OH 43054 _____

Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 325.00

Name of Employer _____ Occupation _____ Payroll deduction \$25 bi-weekly
Motorists Mutual Insurance Company Vice President _____

Receipt For: 2002 Aggregate Year-to-Date ▼ _____
 Primary General _____ 850.00
 Other (specify) ▼ _____

Transaction ID: SA11A1.4630

B. Charles Gaskil

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____
1425 Briar Meadow Dr. _____
City _____ State _____ Zip Code _____
Worthington OH 43235 _____

Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 30.00

Name of Employer _____ Occupation _____ Payroll deduction \$10 bi-weekly
Motorists Mutual Insurance Company Manager _____

Receipt For: 2002 Aggregate Year-to-Date ▼ _____
 Primary General _____ 214.00
 Other (specify) ▼ _____

Transaction ID: SA11A1.4633

C. Peter Hitecock

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____
1409 Snowmass Road _____
City _____ State _____ Zip Code _____
Columbus OH 43235 _____

Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 60.00

Name of Employer _____ Occupation _____ Payroll deduction \$15 bi-weekly
Motorists Mutual Insurance Company Corporate Actuary _____

Receipt For: 2002 Aggregate Year-to-Date ▼ _____
 Primary General _____ 236.00
 Other (specify) ▼ _____

Transaction ID: SA11A1.4637

SUBTOTAL of Receipts This Page (optional) ► **415.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Paul Holmquist Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 462 Maplebrooke Drive E 10 / 26 / 2001

City State Zip Code
 Westerville OH 43082 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 108.00

Name of Employer Occupation Payroll deduction \$12 bi-weekly
 Motorists Mutual Insurance Company Corporate Counsel

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General 234.00
 Other (specify) ▼

Transaction ID: SA11A1.4638

B. Paul Holmquist Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 462 Maplebrooke Drive E 12 / 31 / 2001

City State Zip Code
 Westerville OH 43082 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 80.00

Name of Employer Occupation Payroll deduction \$15 bi-weekly
 Motorists Mutual Insurance Company Corporate Counsel

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 294.00
 Other (specify) ▼

Transaction ID: SA11A1.4639

C. Wallace Hyeel Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 5939 Coventry Hurst Lane 12 / 31 / 2001

City State Zip Code
 Hilliard OH 43026 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 195.00

Name of Employer Occupation Payroll deduction \$15 bi-weekly
 Motorists Mutual Insurance Company Manager

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 390.00
 Other (specify) ▼

Transaction ID: SA11A1.4642

SUBTOTAL of Receipts This Page (optional) ▶ **363.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

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

Mailing Address
7925 Greenside Lane

City State Zip Code
Worthington OH 43235

Date of Receipt
 N M / D E / Y Y Y Y
10 26 2001

Amount of Each Receipt this Period
225.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll deduction \$25 bi-weekly
Motorists Mutual Insurance Company Sr. Vice President, CIO

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **550.00**

Transaction ID: SA11A1.4645

B. Full Name (Last, First, Middle Initial)
David Kaufman

Mailing Address
7925 Greenside Lane

City State Zip Code
Worthington OH 43235

Date of Receipt
 N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll deduction \$30 bi-weekly
Motorists Mutual Insurance Company Sr. Vice President, CIO

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **670.00**

Transaction ID: SA11A1.4646

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

Mailing Address
3910 Caswell Road

City State Zip Code
Johnstown OH 43031

Date of Receipt
 N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
260.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll deduction \$20 bi-weekly
Motorists Mutual Insurance Company Vice President

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **420.00**

Transaction ID: SA11A1.4647

SUBTOTAL of Receipts This Page (optional) ▶ **605.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 20

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
Orville Lyons, II

Mailing Address
1165 Starbuck Ct.

City State Zip Code
Westerville OH 43081

Date of Receipt
N M / D E / Y Y Y Y
11 / 21 / 2001

Amount of Each Receipt this Period
275.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 800.00
Other (specify) ▼

Transaction ID: SA11A1.4658

B. Full Name (Last, First, Middle Initial)
Orville Lyons, II

Mailing Address
1165 Starbuck Ct.

City State Zip Code
Westerville OH 43081

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
64.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$27 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 654.00
Other (specify) ▼

Transaction ID: SA11A1.4659

C. Full Name (Last, First, Middle Initial)
Joseph Mental

Mailing Address
5725 Ballymead Blvd.

City State Zip Code
Dublin OH 43016

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
45.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Manager

Payroll deduction \$15 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 206.00
Other (specify) ▼

Transaction ID: SA11A1.4661

SUBTOTAL of Receipts This Page (optional) ▶ **374.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

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

Mailing Address
 1D187 Chelton Wood
 City: Powell State: OH Zip Code: 43065

Date of Receipt
 N M / D E / Y Y Y Y
 12 / 31 / 2001

Amount of Each Receipt this Period
 520.00

FEC ID number of contributing federal political committee.

Name of Employer: Motorists Mutual Insurance Company Occupation: Secretary
 Payroll deduction \$40 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1040.00

Transaction ID: SA11A1.4664

Full Name (Last, First, Middle Initial)
B. Randolph Rudowicz

Mailing Address
 1026 Loch Ness Avenue
 City: Worthington State: OH Zip Code: 43085

Date of Receipt
 N M / D E / Y Y Y Y
 10 / 26 / 2001

Amount of Each Receipt this Period
 99.00

FEC ID number of contributing federal political committee.

Name of Employer: Motorists Mutual Insurance Company Occupation: Manager
 Payroll deduction \$11 bi-weekly

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 242.00

Transaction ID: SA11A1.4667

Full Name (Last, First, Middle Initial)
C. Randolph Rudowicz

Mailing Address
 1026 Loch Ness Avenue
 City: Worthington State: OH Zip Code: 43085

Date of Receipt
 N M / D E / Y Y Y Y
 12 / 31 / 2001

Amount of Each Receipt this Period
 100.00

FEC ID number of contributing federal political committee.

Name of Employer: Motorists Mutual Insurance Company Occupation: Manager
 Payroll deduction \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00

Transaction ID: SA11A1.4668

SUBTOTAL of Receipts This Page (optional) ▶ **719.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)
A. Karen Schwartz

Mailing Address
1252 Pond Hollow Lane

City State Zip Code
New Albany OH 43054

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
325.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 850.00
Other (specify) ▼

Transaction ID: SA11A1.4669

Full Name (Last, First, Middle Initial)
B. Charles Stapleton

Mailing Address
12738 Wheaton Avenue

City State Zip Code
Pickerington OH 43147

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
325.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 850.00
Other (specify) ▼

Transaction ID: SA11A1.4672

Full Name (Last, First, Middle Initial)
C. Duane Swartz

Mailing Address
1505 Clubview Blvd., S.

City State Zip Code
Columbus OH 43235

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
380.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Senior Vice President

Payroll deduction \$30 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 780.00
Other (specify) ▼

Transaction ID: SA11A1.4673

SUBTOTAL of Receipts This Page (optional) ▶ **1040.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
James Vermilion

Mailing Address
919 Byron Avenue

City State Zip Code
Columbus OH 43227

Date of Receipt
 N M / D E / Y Y Y Y
10 26 2001

Amount of Each Receipt this Period
270.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$30 bi-weekly

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **860.00**

Transaction ID: SA11A1.4674

B. Full Name (Last, First, Middle Initial)
James Vermilion

Mailing Address
919 Byron Avenue

City State Zip Code
Columbus OH 43227

Date of Receipt
 N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
140.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$35 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **800.00**

Transaction ID: SA11A1.4675

C. Full Name (Last, First, Middle Initial)
Richard Watson

Mailing Address
3249 Scioto Run Blvd.

City State Zip Code
Hilliard OH 43026

Date of Receipt
 N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
325.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Vice President

Payroll deduction \$25 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **650.00**

Transaction ID: SA11A1.4676

SUBTOTAL of Receipts This Page (optional) ▶ **735.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

A. Full Name (Last, First, Middle Initial)
 Peter Weisenberger

Date of Receipt
 N M / D E / Y Y Y Y
 12 / 31 / 2001

Mailing Address
 7105 Lakebrook Blvd.

City State Zip Code
 Columbus OH 43235

Amount of Each Receipt this Period
 280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll deduction \$20 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Transaction ID: SA11A1.4677

B. Full Name (Last, First, Middle Initial)
 Charles Wicker

Date of Receipt
 N M / D E / Y Y Y Y
 10 / 26 / 2001

Mailing Address
 1229 Smiley Court

City State Zip Code
 Westerville OH 43081

Amount of Each Receipt this Period
 225.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll deduction \$25 bi-weekly

Receipt For: 2001 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Transaction ID: SA11A1.4678

C. Full Name (Last, First, Middle Initial)
 Charles Wicker

Date of Receipt
 N M / D E / Y Y Y Y
 12 / 31 / 2001

Mailing Address
 1229 Smiley Court

City State Zip Code
 Westerville OH 43081

Amount of Each Receipt this Period
 120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Motorists Mutual Insurance Company Vice President

Payroll deduction \$30 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 670.00

Transaction ID: SA11A1.4679

SUBTOTAL of Receipts This Page (optional) ▶ **605.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 20

(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)
A. Charles Williams

Mailing Address
8D Barleycorn Drive

City State Zip Code
Sunbury OH 43074

Date of Receipt
N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
195.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Manager

Payroll deduction \$15 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 315.00
Other (specify) ▼

Transaction ID: SA11A1.4680

Full Name (Last, First, Middle Initial)
B. Michael Wiseman

Mailing Address
8D Timberknoll Loop

City State Zip Code
Powell OH 43065

Date of Receipt
N M / D E / Y Y Y Y
11 08 2001

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Treasurer

Payroll deduction \$30 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 690.00
Other (specify) ▼

Transaction ID: SA11A1.4681

Full Name (Last, First, Middle Initial)
C. Michael Wiseman

Mailing Address
9D Timberknoll Loop

City State Zip Code
Powell OH 43065

Date of Receipt
N M / D E / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
105.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Motorists Mutual Insurance Company Treasurer

Payroll deduction \$35 bi-weekly

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General 795.00
Other (specify) ▼

Transaction ID: SA11A1.4682

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	6884.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Pat Tiberi for Congress		Date of Disbursement 11 / 26 / 2001	
Mailing Address 2021 E. Dublin Granville Road City Columbus State OH Zip Code 43229		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Political campaign contribution Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: 5B23.4691	
State: District:			

B.

C.

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Citizens for DeWine		Date of Disbursement 09 ^N / 24 ^M / 2001 ^Y	
Mailing Address 506 Crist Wind Court City: Fairborn State: OH Zip Code: 45324		Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4706	
State: District:			

Full Name (Last, First, Middle Initial) B. Citizens for Evans		Date of Disbursement 11 ^N / 01 ^M / 2001 ^Y	
Mailing Address 829 Golden Drive City: Newark State: OH Zip Code: 43056		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4709	
State: District:			

Full Name (Last, First, Middle Initial) C. Citizens for Gardner		Date of Disbursement 09 ^N / 24 ^M / 2001 ^Y	
Mailing Address 14900 Mitchell Road City: Bowling Green State: OH Zip Code: 43402		Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4708	
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Citizens for Geoffrey C. Smith		Date of Disbursement 09 / 24 / 2001	
Mailing Address 865 Macon City State Zip Code Columbus OH 43206		Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4705	
State: District:			

Full Name (Last, First, Middle Initial) B. Citizens for Hottinger		Date of Disbursement 09 / 12 / 2001	
Mailing Address 386 Sabrecliff Drive City State Zip Code Newark OH 43056		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4702	
State: District:			

Full Name (Last, First, Middle Initial) C. Citizens for Householder		Date of Disbursement 08 / 04 / 2001	
Mailing Address 138 High Street City State Zip Code Glenford OH 43739		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Political contribution		Category/ Type	
Candidate Name Citizens for Householder			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4896	
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Committee for Blasdel			Date of Disbursement 11 / 01 / 2001	
Mailing Address 16428 Harvard Avenue City East Liverpool State OH Zip Code 43920			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Political Contribution			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: SB29.4710	
State: District:				

Full Name (Last, First, Middle Initial) B. Committee to Elect Lynn Wachtmann			Date of Disbursement 11 / 01 / 2001	
Mailing Address 550 Euclid Street City Napoleon State OH Zip Code 43645			Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Political Contribution			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: SB29.4712	
State: District:				

Full Name (Last, First, Middle Initial) C. Elect Clancy Committee			Date of Disbursement 08 / 06 / 2001	
Mailing Address 4474 Woodtrail Lane City Cincinnati State OH Zip Code 45251			Amount of Each Disbursement this Period 125.00	
Purpose of Disbursement Political Contribution			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: SB29.4897	
State: District:				

SUBTOTAL of Disbursements This Page (optional) ▶	875.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. GOP GOLF PAC		Date of Disbursement 08 / 06 / 2001	
Mailing Address 11006 Reading Road Suite 101 City State Zip Code Sharonville OH 45251		Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement Political contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼	Transaction ID: SB29.4698	
State: District:			

Full Name (Last, First, Middle Initial) B. Republican Senate Campaign Committee		Date of Disbursement 11 / 26 / 2001	
Mailing Address 57 East Gay Street City State Zip Code Columbus OH 43215		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: SB29.4714	
State: District:			

Full Name (Last, First, Middle Initial) C. Taft-O'Connor Campaign		Date of Disbursement 11 / 28 / 2001	
Mailing Address 211 South Fifth Street City State Zip Code Columbus OH 43215		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: SB29.4716	
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3025.00
TOTAL This Period (last page this line number only)	6450.00