Image# 12970173448								PAGE 1 / 13
FEC FORM 3X	AND	DRT O DISBU r Than An	URSE	MENT	s		Office Lice C	belv
1. NAME OF	TYPE OR	PRINT V	Exa	imple: If typir	na. type	10004045	Office Use C	iniy
COMMITTEE (in full)				r the lines.	3, 977	12FE4M5		
Insured Retiremen	t Institute P	olitical Ac	tion Comr	nittee				
ADDRESS (number and stre		w York Avenu	e NW					
▼ ·	Ste 825							
Check if different than previously reported. (ACC)	Washin	gton					20005	
2. FEC IDENTIFICATIO	N NUMBER <b>V</b>		CITY 🔺		S		ZIF	° CODE ▲
C C00490474			3. IS THIS REPORT		NEW N) <b>OR</b>	(A)	IENDED	
<ul> <li><b>4. TYPE OF REPOR</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	Re Du	nthly port e On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	Ē	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11 (Non-Election Year Only) Dec 20 (M12 (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Rep July 15 Quarterly Rep October 15	(C)	12-Day <b>PRE</b> -Electio Report for t		Primary (12F Convention (		General ( Special (		Runoff (12R)
August Alexandree		E	Election on	M M /	D D /	Y Y Y Y Y Y		the ate of
July 31 Mid-Y Report (Non- Year Only) (N	election	30-Day <b>POST</b> -Electi Report for ti	·	General (300	G)	Runoff (3	0R)	Special (30S)
Termination R (TER)	Report		Election on	M M /	D D /	Y Y Y Y Y		the ate of
5. Covering Period	07 / D		011	through	M M 12	/ D D / 31	2011	Y
I certify that I have examin			est of my kno	wledge and I	belief it is true	e, correct and	complete.	
Type or Print Name of Tre	asurer John M	eighan Little						
Signature of Treasurer	John Meighan Lii 	tle		[Electronically	y Filed] Da	ate 01	/ D D 30	/ Y Y Y Y 2012
NOTE: Submission of false,	erroneous, or in	complete inform	mation may su	ubject the pers	son signing thi	is Report to th	ne penalties d	of 2 U.S.C. §437g.
Office Use Only								ORM 3X 12/2004

#### 01/30/2012 15 : 43

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
١	Write or Type Committee Name		
	Insured Retirement Institute Politica	al Action Committee	
F	Report Covering the Period: From:		12 / D D / Y Y Y Y 12 31 2011
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2011	[	14960.48
	(b) Cash on Hand at Beginning of Reporting Period	26672.04	
	(c) Total Receipts (from Line 19)	22258.66	47014.38
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	48930.70	61974.86
7.	Total Disbursements (from Line 31)	15000.00	28044.16
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33930.70	33930.70
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10	. Debts and Obligations Owed <b>BY</b> 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 800-424-9530 Local 202-694-1100

Image# 1	2970173450
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### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### Insured Retirement Institute Political Action Committee

Report Covering the Period: From: 07	/ D D / Y Y Y Y 01 2011 To	12 / D D / Y Y Y Y 1 31 / 2011					
I. Receipts COLUMN A COLUMN E							
1. Contributions (other than loans) From:							
(a) Individuals/Persons Other							
Than Political Committees	11000.00	17000.00					
(i) Itemized (use Schedule A)	11000.00	17000.00					
Γ		0.00					
(ii) Unitemized	7 0.00	0.00					
(iii) TOTAL (add	14000.00	17000.00					
Lines 11(a)(i) and (ii)	11000.00	7 7 7					
	0.00	0.00					
(b) Political Party Committees	7 7 7 0.00	7 7 7					
(c) Other Political Committees	11250.00	30000.00					
(such as PACs)(d) Total Contributions (add Lines	7 /7 // //	7					
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	22250.00	47000.00					
2. Transfers From Affiliated/Other	7 7						
Party Committees	0.00	0.00					
Tarty Commutees	7 7 7 0.00	7 7 7					
All Loans Received	0.00	0.00					
<b>.</b> .	0.00	0.00					
I. Loan Repayments Received	0.00	0.00					
5. Offsets To Operating Expenditures							
(Refunds, Rebates, etc.)	0.00	0.00					
(Carry Totals to Line 37, page 5)		0.00					
. Refunds of Contributions Made							
to Federal Candidates and Other Political Committees	0.00	0.00					
7. Other Federal Receipts	0.00	0.00					
(Dividends, Interest, etc.)	0.00	14.38					
3. Transfers from Non-Federal and Levin Funds	8.66	14.30					
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
	7 7 7	0.00					
Γ	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
	0.00						
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
. Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))	22258.66	47014.38					
	7 7						
. Total Federal Receipts							
(subtract Line 18(c) from Line 19)►	22258.66	47014.38					

### DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)		Page 4				
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Operating Expenditures: – (a) Allocated Federal/Non-Federal Activity (from Schedule H4)						
(i) Federal Share	0.00	0.0				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating Expenditures	0.00	44.16				
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	44.10				
Transfers to Affiliated/Other Party		0.00				
Committees Contributions to Federal Candidates/Committees	0.00					
and Other Political Committees	15000.00	28000.00				
(use Schedule E) Coordinated Party Expenditures	0.00	0.0				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
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				
Other Disbursements	0.00	0.00				
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15000.00	28044.1				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	15000.00	28044.16				

I

### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	22250.00	47000.00
<ul> <li>Total Contribution Refunds (from Line 28(d))</li> </ul>	0.00	0.00
<ol> <li>Net Contributions (other than loans) (subtract Line 34 from Line 33)</li> </ol>	22250.00	47000.00
<ul> <li>Total Federal Operating Expenditures</li> <li>(add Line 21(a)(i) and Line 21(b))</li> </ul>	0.00	44.16
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	44.16

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
ILIVILED NEVERIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16							
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	I ay not be sold or used by any p Iddress of any political committe	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) Insured Retirement Institute	Political Acti	on Committee								
Full Name (Last, First, Middle Initial) Greg P Cicotte			Date of Receipt							
Mailing Address P.O. Box 160			M M / D D / Y Y Y Y 08 02 2011							
City Belleville	State MI	Zip Code 48112-0160	Transaction ID : SA11AI.4196 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		2000.00							
Name of Employer Jackson National Life Receipt For:	Occupation President		Individual PAC Contribution							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	]							
Full Name (Last, First, Middle Initial) B. William F Loehning			Date of Receipt							
Mailing Address 132 Adams Point Road			08 01 / Y Y Y Y Y 08 01 2011							
City Barrington	State RI	Zip Code 02806	Transaction ID : SA11AI.4193 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		2000.00							
Name of Employer Fidelity Investments	Occupation EVP, Insura	ance Relationship Management	Individual PAC Contribution							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	]							
Full Name (Last, First, Middle Initial) C. Roth R. Lawrence			Date of Receipt							
Mailing Address 205 West 76th Street Apt PH3E			09 30 / Y Y Y Y 2011							
City New York	State NY	Zip Code 10023	Transaction ID : SA11AI.4252 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		2000.00							
Name of Employer Advisor Group	Occupation President 8		Individual Contribution							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	]							
SUBTOTAL of Receipts This Page (optiona	l)		6000.00							
TOTAL This Period (last page this line num	ber only)									

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 7 OF

		Detailed Summary Page		11a 13		-	1b 4	11c		12	47							
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements many	L ay not be sold or used by any p iddress of any political committee	erson f	or the	purp	po	se of s	15 olicitin	g co	16 ntribut	ions							
NAME OF COMMITTEE (In Full)	iy the name and a	uncess of any political committee		icit cor	UID	Jut		JIII SUC		nnnnt								
Insured Retirement Institute	Political Acti	on Committee																
Full Name (Last, First, Middle Initial) Catherine J Weatherford			[	Date of	Re	ece	eipt											
Mailing Address 3625 10th Street N Unit 505	01-11	Zin Ood-	07 14 2011 Transaction ID : SA11AI.4191															
City Arlington	State VA	Zip Code 22201					<u>n ID : S</u> ach Re											
FEC ID number of contributing federal political committee.	С					7				5000.	00							
Name of Employer	Occupation		Ir	dividua	al P/	AC	C Contri	bution										
Insured Retirement Institute	President 8																	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	]															
Full Name (Last, First, Middle Initial) B.				Date of	Re	ece	eipt											
Mailing Address				M M	1	ľ	DDD	/ Y	Y	Y	Y							
City	City State Zip Code								Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С																	
Name of Employer	Occupation																	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V	]															
Full Name (Last, First, Middle Initial)				Date of	Re	ece	eipt											
Mailing Address				M M	/	ľ	D D	/ Y	Y	Y	Y							
City	State	Zip Code		Amount	of	F	ach Re	ceint t	nis F	Period	_							
FEC ID number of contributing federal political committee.	ě							, teipt ti		enou								
Name of Employer	Name of Employer Occupation																	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	]															
SUBTOTAL of Receipts This Page (option	al)					-				5000.	00							
TOTAL This Period (last page this line nu						7		,	1	1000.	00							

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 8 OF

ITEMIZED RECEIPTS	- 	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)         11a         11b         X         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Insured Retirement Institute F	the name and a	ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) ALLIANZ OF AMERICA CORPORATION/FIRE Mailing Address 1101 CONNECTICUT AVE SUITE 950 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State DC C CO Occupation	Zip Code 20036 0095109	Date of Receipt
B. Full Name (Last, First, Middle Initial) ING AMERICA INSURANCE HOLDINGS IN Mailing Address ONE ORANGE WAY - C1N City WINDSOR FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State CT C CO Occupation	Zip Code 06095 0184028	Date of Receipt         09       16         2011         Transaction ID : SA11C.4198         Amount of Each Receipt this Period         2500.00         PAC-to-PAC Contribution
C. Full Name (Last, First, Middle Initial) JOHN HANCOCK LIFE INSURANCE COMPANY ( Mailing Address 601 CONGRESS ST FL 13 City BOSTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State MA C C0 Occupation	Zip Code 02210 0137265	Date of Receipt 09 02 2011 Transaction ID : SA11C.4200 Amount of Each Receipt this Period 5000.00 PAC-to-PAC Contribution
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			10000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 9 OF

		Detailed Summary Page		11a 13		11b 14	X 11c	12	17						
Any information copied from such Reports an or for commercial purposes, other than using				or the		oose c									
NAME OF COMMITTEE (In Full) Insured Retirement Institute F															
Full Name (Last, First, Middle Initial) A. NATIONWIDE MUTUAL INSURANCE (	COMPANY POL	ITICAL ACTION COMMITTEE	Date of Receipt												
Mailing Address ONE NATIONWIDE PLAZ 1-27-10				м м 10		D 14	1	у у 2011	Y						
City COLUMBUS	State OH	Zip Code 43215					: SA11C.4								
FEC ID number of contributing federal political committee.		0076174		mouni		Each	Receipt th	iis Period 1250							
Name of Employer	Occupation	1	- P.	AC-to-	PAC	Contr	ribution								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2500.00													
Full Name (Last, First, Middle Initial) B.				Date of	_	· ·									
Mailing Address	Mailing Address						M M / D / Y Y Y Y								
City	State	Zip Code		mount	t of	Each	Receipt th	is Period							
FEC ID number of contributing federal political committee.	C					,	7								
Name of Employer	Occupation														
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V													
Full Name (Last, First, Middle Initial)	1			Date of	f Re	ceipt									
Mailing Address				M = M		D	D / Y	Y Y	Y						
City	State	Zip Code		mount	t of	Each	Receipt th	is Period							
FEC ID number of contributing federal political committee.	С					,	7								
Name of Employer	Occupation	1													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼													
SUBTOTAL of Receipts This Page (optional)	)							1250	.00						
TOTAL This Period (last page this line numb						,		11250	.00						

S	CHEDULE B (FEC Form 3X)			F	DR I	LINE	NE NUMBER: PAGE 10 OF 13										
IT	EMIZED DISBURSEMENTS	Use separa			k only	lly one)											
		for each category of the Detailed Summary Page			$\square$	21b 27		22 28a	×	23 28b		24 28c	25 29		26 30b		
	y information copied from such Reports and Stat for commercial purposes, other than using the na																
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		_														
	Insured Retirement Institute Politi	cal Action (	Committee														
~	Full Name (Last, First, Middle Initial)						_		( D'-								
А.	BECERRA FOR CONGRESS							Date of	r Dis								
	Mailing Address P.O. BOX 261060						08 / 19 / Y Y Y Y 2011										
	City		Zip Code					Trans	acti	on ID	: SE	23.42	17				
	LOS ANGELES Purpose of Disbursement	CA	90026														
	General 2012 Contribution			0	11		А	moun	t of	Each	Disb	ursem	ent this	s Peri	iod		
	Candidate Name			Cate	egor	rv/	1	-			-		40	00.00			
	XAVIER BECERRA	_			ype	<u> </u>				7	_	7	10	00.00			
	Office Sought: X House Disburs Senate	ement For: 20 <sup>2</sup> Primary	I2 X General														
	President	Other (specify															
	State: CA District: 34		, <b>,</b>														
_	Full Name (Last, First, Middle Initial)																
В.	CHAMBLISS FOR SENATE						C	Date o	f Dis	burse	emen	t					
	Mailing Address POST OFFICE BOX 12469						1	м м 12	1			/ Y	у у 2011	Y			
	Walling Address POST OFFICE BOX 12469						12 12 2011										
	City ATLANTA		Zip Code 30355					Trans	sacti	on ID	) : SE	323.42	35				
	Purpose of Disbursement General 2012 Contribution			-	-												
	Candidate Name	011						Amount of Each Disbursement this Period									
	SAXBY CHAMBLISS						1000.00							)			
		ement For: 20	12	1	/pe			_		,		7					
	X Senate	Primary	X General														
	President	Other (specify															
	State: GA District: 00																
C.	Full Name (Last, First, Middle Initial) ED ROYCE FOR CONGRESS						C	Date o	f Dis	burse	emen	t					
							1	M M	/	D	D	/ Y	Y Y	Y	1		
	Mailing Address PO BOX 2525						J.	09		1	6		2011				
	City	State 2	Zip Code					Trans	acti	on ID		323.42	24				
	ORANGE Purpose of Disbursement	CA	92859					inant	ωυι		. 36	,20.42					
	Primary 2012 Contribution			0	11		٨	moun	t of	Each	Dich	urcom	ont thi	Dori	iod		
	Candidate Name		21/	Amount of Each Disbursement this Period													
	ED MR ROYCE	Gatedory/								1000.00							
		ement For: 20 <sup>2</sup>															
	President	Primary Other (coocify	General														
	State: CA District: 40	Other (specify	, ▼														
Г								_	-		_	-	_		_		
s	UBTOTAL of Disbursements This Page (optional)									7		7	30	00.00			
-							- 11										
-	OTAL This Period (last page this line number onl	V)															

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER PAGE 11 OF 13						
	EMIZED DISBURSEMENTS	Use separate schedul for each category of t		(check only	ly one)						
		Detailed Summary Pa		21b	22 X 23 24 25 26 28a 28b 28c 29 30b						
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam			by any perso	on for the purpose of soliciting contributions						
$\square$	NAME OF COMMITTEE (In Full)										
	Insured Retirement Institute Politic	al Action Commit	ttee								
Δ.	Full Name (Last, First, Middle Initial) FRIENDS OF CAROLYN MCCAR	тиу			Date of Disbursement						
	FRIENDS OF CAROLIN MCCAR										
	Mailing Address 151 LINDEN ROAD				07 21 2011						
	,	State Zip Code			Transaction ID : SB23.4216						
	MINEOLA Purpose of Disbursement	NY 11501									
	Primary 2012 Contribution		10	011	Amount of Each Disbursement this Period						
	Candidate Name			Category/	1000.00						
	CAROLYN MCCARTHY			Туре	1000.00						
		nent For: 2012 Primary Gener Other (specify) ▼	ral								
	State: NY District: 04										
_	Full Name (Last, First, Middle Initial)										
в.	FRIENDS OF JEB HENSARLING				Date of Disbursement						
	Mailing Address PO BOX 820504				09 / 16 / Y Y Y Y 2011						
	DALLAS	State Zip Code TX 75382			Transaction ID : SB23.4226						
	Purpose of Disbursement Primary 2012 Contribution			011	Amount of Each Disbursement this Period						
			0	Category/	2000.00						
	JEB HON. HENSARLING Office Sought: X House Disburser	nent For: 2012		Туре							
		Primary Gener	ral								
	President	Other (specify)									
_	State: TX District: 05										
C.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN				Date of Disbursement						
	Mailing Address PO BOX 12567				09 / 16 / Y Y Y Y 2011						
	City	State Zip Code			Transaction ID : SB23.4221						
	COLUMBIA Purpose of Disbursement	SC 29211									
	General 2012 Contribution	10	011	Amount of Each Disbursement this Period							
	Candidate Name	Category/									
	JAMES E. CLYBURN		Туре	1000.00							
	Senate President	nent For: 2012 Primary X Gener Other (specify) ▼	ral								
	State: SC District: 06										
s	UBTOTAL of Disbursements This Page (optional)			····· ►	4000.00						
т	OTAL This Period (last page this line number only)			•••••• •							

S	CHEDULE B (FEC Form 3X)				NE NUMBER: PAGE 12 OF 13								
	EMIZED DISBURSEMENTS	Use separate for each cated Detailed Sum	gory of the	(check only 21b 27									
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)		_										
	Insured Retirement Institute Politic	al Action Co	ommittee										
Α.	Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE	Date of Disbursement											
	Mailing Address 175 SOUTH WEST TEMPLE SUIT												
	SALT LAKE CITY		Code 101		Transaction ID : SB23.4237								
	Purpose of Disbursement Primary 2012 Contribution			011	Amount of Each Disbursement this Period								
	Candidate Name ORRIN G HATCH			Category/ Type	2500.00								
		nent For: 2012 Primary Other (specify)	General	Турс									
	State: UT District: 00												
В.	Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE		Date of Disbursement										
	Mailing Address 175 SOUTH WEST TEMPLE SUIT		09 20 2011										
	SALT LAKE CITY		Code 101		Transaction ID : SB23.4239								
	Purpose of Disbursement General 2012 Contribution			011	Amount of Each Disbursement this Period 2500.00								
	Candidate Name ORRIN G HATCH			Category/ Type									
		nent For: 2012 Primary X Other (specify)	General	Туре									
c.	Full Name (Last, First, Middle Initial) HUIZENGA FOR CONGRESS	Date of Disbursement											
	Mailing Address 441 WILLIAMS COURT												
	ZEELAND		Code 464		Transaction ID : SB23.4233								
	Purpose of Disbursement Primary 2012 Contribution Candidate Name	011	Amount of Each Disbursement this Period										
	WILLIAM P HUIZENGA	Category/ Type											
	Office Sought: House Disburser Senate President State: MI District: 02	nent For: 2012 Primary Other (specify)	General ▼										
					6000.00								
⊢	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)												

SCHEDULE B (FEC Form 3X)					OR LINE NUMBER: PAGE 13 OF 13											
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			check only one)											
			Summary Page			21b 27	22 28a	×	23 28b	2	4 8c	25 29	26 30b			
	y information copied from such Reports and Stater for commercial purposes, other than using the nan															
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)		•													
	Insured Retirement Institute Politic	al Actio	n Committee													
	Full Name (Last, First, Middle Initial) JIM HIMES FOR CONGRESS								Date of Disbursement							
								11 / D D / Y Y Y Y 2011								
	Mailing Address 857 POST ROAD, #312															
	City S FAIRFIELD	State CT						Transaction ID : SB23.4231								
	Purpose of Disbursement General 2012 Contribution						•		<b>-  </b> -	Dista			Devia			
	candidate Name			011			Amount of Each Disbursement this Period									
	JIM HIMES			Category/ Type					7		7	100	0.00			
	Office Sought: House Disburser	2012 X General														
	President	Primary Other (spe														
	State: CT District: 04															
	Full Name (Last, First, Middle Initial) JOHN CAMPBELL FOR CONGRESS						Date of Disbursement									
							M M / D D / Y Y Y Y 09 09 2011									
	Mailing Address 7700 IRVINE CENTER DRIVE SUITE 800									19		2011				
	IRVINE	State CA	Zip Code 92618				Tran	sact	ion ID	: SB2	3.424:	3				
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	Candidate Name					y/	1000.00									
		JOHN BT III CAMPBELL           Office Sought:         Y House         Disbursement For: 2012			ype				7	-	7	100	0.00			
	Senate Sought.	Primary	X General													
	State: CA District: 48	Other (spe	cify) 🔻													
	Full Name (Last, First, Middle Initial)															
C.								Date of Disbursement								
	Mailing Address															
	City State Zip Code															
	Purpose of Disbursement															
	Candidate Name					·y/	Amour	nt of	Each	Disbu	seme	nt this	Period			
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General cify) ▼		ype											
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s	UBTOTAL of Disbursements This Page (optional)											2000	0.00			
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