

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

ADDRESS (number and street) 8700 West Bryn Mawr Suite 1200S Chicago IL 60631-3512

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00066472

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 03 / 01 / 2014 through [MM] / [DD] / [YYYY] 03 / 31 / 2014

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 June T. Holmes

Signature of Treasurer June T. Holmes [Electronically Filed] Date 04 / 15 / 2014

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | 171710.31 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 168682.89 | |
| (c) Total Receipts (from Line 19) | 62975.70 | 144437.35 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 231658.59 | 316147.66 |
| 7. Total Disbursements (from Line 31)..... | 54611.18 | 139100.25 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 177047.41 | 177047.41 |
| 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 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Report Covering the Period: From: / / To: / /

| 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)..... | 47295.00 | 92835.81 |
| (ii) Unitemized | 13319.52 | 27474.69 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 60614.52 | 120310.50 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 21250.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 60614.52 | 141560.50 |
| 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 37, page 5)..... | 2361.18 | 2876.85 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 62975.70 | 144437.35 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 62975.70 | 144437.35 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 | 2361.18 | 2850.25 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 2361.18 | 2850.25 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 49500.00 | 128000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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 | 2750.00 | 8250.00 |
| 30. 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 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 54611.18 | 139100.25 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 54611.18 | 139100.25 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 60614.52 | 141560.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 60614.52 | 141560.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 2361.18 | 2850.25 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 2361.18 | 2876.85 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | -26.60 |

**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 6 OF 57 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Jill H. Andy
Full Name (Last, First, Middle Initial)

Mailing Address 50 Amica Way

City Lincoln State RI Zip Code 02865-1155

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 03 / 06 / 2014
Transaction ID : A3C17794EFCF4A84A55A

Amount of Each Receipt this Period 480.00

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

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Chief Investment Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 10 / 2014
Transaction ID : A0BB96C000054064B424

Amount of Each Receipt this Period 240.00

C. Paul C. Blume
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Senior Vice President, State Governmen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 328.00

Date of Receipt 03 / 12 / 2014
Transaction ID : 20140312171932-3

Amount of Each Receipt this Period 82.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 802.00

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: (check only one) | PAGE 7 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Paul C. Blume
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Senior Vice President, State Governmen

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-3

Amount of Each Receipt this Period
82.00

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

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Executive Vice President - Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 10 / 2014
Transaction ID : CF43468F45314A51BDFF

Amount of Each Receipt this Period
600.00

C. Kenton Brine
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Water St SW
Apt 2

City Olympia State WA Zip Code 98501-2295

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Assistant Vice President, State Govern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-5

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 732.00 |
| 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: (check only one) | PAGE 8 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Kenton Brine
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 Water St SW
 Apt 2
 City Olympia State WA Zip Code 98501-2295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Assistant Vice President, State Govern
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2014
Transaction ID : 20140328180615-5
 Amount of Each Receipt this Period
 50.00

B. Beau Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Alameda De Las Pulgas
 City San Mateo State CA Zip Code 94403-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Casualty Group Occupation Chairman of the Board - Chief Executiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : C35E0B29CD7745669C08
 Amount of Each Receipt this Period
 1200.00

C. Jonathan A. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Alameda De Las Pulgas
 City San Mateo State CA Zip Code 94403-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Casualty Group Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2014
Transaction ID : 2202324AC8094CF5A029
 Amount of Each Receipt this Period
 400.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1650.00 |
| 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: (check only one) | PAGE 9 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Chair, CCMC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2014

Transaction ID : 8FD51FA40DC94F38B0DC

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : E9EFB3F9262E3DFBEAE

Amount of Each Receipt this Period
 240.00

C. John E. Cahill Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 425 California St

City San Francisco State CA Zip Code 94104-2102

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2014

Transaction ID : 6B7AC04FA2F14014BE9A

Amount of Each Receipt this Period
 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3740.00 |
| 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: (check only one) | PAGE 10 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Kelly Campbell | | Date of Receipt 03 / 12 / 2014 Transaction ID : 20140312171932-9 |
| Mailing Address 1535 Grant St Ste 304 | | Amount of Each Receipt this Period 50.00 |
| City Denver | State CO | FEC ID number of contributing federal political committee. C |
| | Zip Code 80203-1843 | Name of Employer PCI Occupation Vice President, State Government Relat |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Kelly Campbell | | Date of Receipt 03 / 28 / 2014 Transaction ID : 20140328180615-9 |
| Mailing Address 1535 Grant St Ste 304 | | Amount of Each Receipt this Period 50.00 |
| City Denver | State CO | FEC ID number of contributing federal political committee. C |
| | Zip Code 80203-1843 | Name of Employer PCI Occupation Vice President, State Government Relat |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. David J. Cercone | | Date of Receipt 03 / 12 / 2014 Transaction ID : 20140312171932-10 |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | Amount of Each Receipt this Period 50.00 |
| City Chicago | State IL | FEC ID number of contributing federal political committee. C |
| | Zip Code 60631-3512 | Name of Employer PCI Occupation Executive Vice President & General Man |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| 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: (check only one) | PAGE 11 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Executive Vice President & General Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-10

Amount of Each Receipt this Period
50.00

B. Alicia E. Charles-St. Justen
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
03 / 13 / 2014
Transaction ID : A4AC11D812921FF3BDE

Amount of Each Receipt this Period
240.00

C. Hong Chen
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Vice President, Actuarial Department

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
03 / 10 / 2014
Transaction ID : C5B64214ECD4444C854C

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00

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: (check only one) | PAGE 12 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Randi Cigelnik | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City Chicago | State IL | Zip Code 60631-3512 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 20140312171932-11 |
| Name of Employer PCI | | Amount of Each Receipt this Period |
| Occupation Senior Vice President, Corporate Secre | | <input type="text" value="50.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="300.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Randi Cigelnik | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | <input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City Chicago | State IL | Zip Code 60631-3512 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 20140328180615-11 |
| Name of Employer PCI | | Amount of Each Receipt this Period |
| Occupation Senior Vice President, Corporate Secre | | <input type="text" value="50.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="300.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Kevin M. Clement | | Date of Receipt |
| Mailing Address 2139 Cliffside Dr | | <input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> |
| City Wixom | State MI | Zip Code 48393-1277 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 20140304121350-7 |
| Name of Employer Amerisure Companies | | Amount of Each Receipt this Period |
| Occupation Director, Enterprise Risk Management | | <input type="text" value="50.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="330.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="150.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 13 OF 57 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Kevin M. Clement
Full Name (Last, First, Middle Initial)
Mailing Address 2139 Cliffside Dr
City Wixom State MI Zip Code 48393-1277
FEC ID number of contributing federal political committee. **C**
Name of Employer Amerisure Companies Occupation Director, Enterprise Risk Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 11 / 2014
Transaction ID : 20140311170924-7
Amount of Each Receipt this Period 50.00

B. Kevin M. Clement
Full Name (Last, First, Middle Initial)
Mailing Address 2139 Cliffside Dr
City Wixom State MI Zip Code 48393-1277
FEC ID number of contributing federal political committee. **C**
Name of Employer Amerisure Companies Occupation Director, Enterprise Risk Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 27 / 2014
Transaction ID : 20140327144055-7
Amount of Each Receipt this Period 50.00

C. Lisa M. Decubellis
Full Name (Last, First, Middle Initial)
Mailing Address 100 Amica Way
City Lincoln State RI Zip Code 02865-1156
FEC ID number of contributing federal political committee. **C**
Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 13 / 2014
Transaction ID : 7674527ADD9C34BF687
Amount of Each Receipt this Period 240.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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: (check only one) | PAGE 14 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Michael M. Dieterle
Full Name (Last, First, Middle Initial)

Mailing Address 47202 White Pines Dr

City State Zip Code
Novi MI 48374-3697

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amerisure Companies Vice President, Field Marketing & Unde

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2014
Transaction ID : 20140304121350-11

Amount of Each Receipt this Period
50.00

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

Mailing Address 47202 White Pines Dr

City State Zip Code
Novi MI 48374-3697

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amerisure Companies Vice President, Field Marketing & Unde

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2014
Transaction ID : 20140311170924-11

Amount of Each Receipt this Period
50.00

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

Mailing Address 47202 White Pines Dr

City State Zip Code
Novi MI 48374-3697

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amerisure Companies Vice President, Field Marketing & Unde

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2014
Transaction ID : 20140327144055-11

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| 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: (check only one) | PAGE 15 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Robert A. Dimuccio
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Amica Way
 City Lincoln State RI Zip Code 02865-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amica Mutual Group Occupation Chairman, President and Chief Executiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : EFB6E66485D42F85F50
 Amount of Each Receipt this Period
 5000.00

B. Carolyn E. Doggett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Alameda De Las Pulgas
 City San Mateo State CA Zip Code 94403-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Casualty Group Occupation Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : 053B839ED37947578B7D
 Amount of Each Receipt this Period
 300.00

C. Stephen F. Dolan
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Amica Way
 City Lincoln State RI Zip Code 02865-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : 6A51F89EE7DE554329D
 Amount of Each Receipt this Period
 240.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5540.00 |
| 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: (check only one) | PAGE 16 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Vincent T. Donnelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 174 Meadow View Ln
 City Lansdale State PA Zip Code 19446-5931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PMA Insurance Group Occupation President and Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 20 / 2014**
Transaction ID : 20140320182450-15
 Amount of Each Receipt this Period **50.00**

B. Vincent T. Donnelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 174 Meadow View Ln
 City Lansdale State PA Zip Code 19446-5931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PMA Insurance Group Occupation President and Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 20 / 2014**
Transaction ID : 20140320182450-3
 Amount of Each Receipt this Period **50.00**

C. Peter F. Drogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Amica Way
 City Lincoln State RI Zip Code 02865-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **03 / 10 / 2014**
Transaction ID : 3391BE3FE53B40E79639
 Amount of Each Receipt this Period **240.00**

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 340.00 |
| 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: (check only one) | PAGE 17 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. George D. Dufala
Full Name (Last, First, Middle Initial)

Mailing Address 100 Erie Insurance Pl

| | | |
|--------------|-------------|------------------------|
| City Erie | State PA | Zip Code 16530-9000 |
|--------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer Erie Insurance Group | Occupation Executive Vice President - Services |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 13 | / | 2014 |

Transaction ID : B92CA5F7D05032B0C09

Amount of Each Receipt this Period
1000.00

B. Richard G. Edwards
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

| | | |
|-----------------|-------------|------------------------|
| City Lincoln | State RI | Zip Code 02865-1156 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer Amica Mutual Group | Occupation Assistant Vice President |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 04 | / | 2014 |

Transaction ID : CD337A876F588A626FB

Amount of Each Receipt this Period
240.00

C. James R. Englese
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Alameda De Las Pulgas

| | | |
|-------------------|-------------|------------------------|
| City San Mateo | State CA | Zip Code 94403-1222 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer California Casualty Group | Occupation Senior Vice President, Secretary and G |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 06 | / | 2014 |

Transaction ID : 307B5113A8F144D9B454

Amount of Each Receipt this Period
1500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2740.00 |
| 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: (check only one) | PAGE 18 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

Mailing Address 125 Pheasant Run

City Newtown State PA Zip Code 18940-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer ARI Insurance Group Occupation President and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 28 / 2014
Transaction ID : AF5A194AA8534605BEA9

Amount of Each Receipt this Period 3000.00

B. Jackie A. Gatlin
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Vice President Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 10 / 2014
Transaction ID : 7036258BBBA84BFCBE53

Amount of Each Receipt this Period 600.00

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

Mailing Address PO Box 23650

City Waco State TX Zip Code 76702-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Farm Bureau Insurance Companies Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 04 / 2014
Transaction ID : 20140304121417-2

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

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: (check only one) | PAGE 19 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Michael F. Gerik

Mailing Address PO Box 23650

City Waco State TX Zip Code 76702-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Farm Bureau Insurance Companies Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
03 / 18 / 2014

Transaction ID : 20140318163432-2

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Douglas A. Goldberg

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation SVP - Group Relations & Business Devel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
03 / 11 / 2014

Transaction ID : 3CE89BEDBD5244F98FCE

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Barbara K. Gurnett

Mailing Address 1650 Telstar Dr

City Colorado Springs State CO Zip Code 80920-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Senior Vice President, Learning and We

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
03 / 21 / 2014

Transaction ID : 49477B87F8764AE7AFB5

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional)..... **1250.00**

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: (check only one) | PAGE 20 OF 57 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. June Holmes | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City Chicago State IL Zip Code 60631-3512 | | Transaction ID : 20140312171932-26 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer PCI Occupation Chief Operating Officer and Treasurer | | <input type="text" value="150.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="900.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. June Holmes | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | <input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City Chicago State IL Zip Code 60631-3512 | | Transaction ID : 20140328180615-26 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer PCI Occupation Chief Operating Officer and Treasurer | | <input type="text" value="150.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="900.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Micaela Isler | | Date of Receipt |
| Mailing Address 444 N Capitol St NW Ste 801 | | <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City Washington State DC Zip Code 20001-1508 | | Transaction ID : 20140312171932-27 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer PCI Occupation Assistant Vice President, State Govern | | <input type="text" value="50.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="300.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="350.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 21 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)
A. Micaela Isler

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Assistant Vice President, State Govern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-27

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Judy Jao

Mailing Address 1900 Alameda De Las Pulgas

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Vice President and Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
03 / 11 / 2014
Transaction ID : EECC215D976E46A7A5BB

Amount of Each Receipt this Period
240.00

Full Name (Last, First, Middle Initial)
C. Scott A. Joyner

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Vice President, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-28

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 345.00

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: (check only one) | PAGE 22 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Scott A. Joyner
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Vice President, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-28

Amount of Each Receipt this Period
55.00

B. Jeffrey Junkas
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Regional Manager, State Government Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
03 / 21 / 2014
Transaction ID : ACDB793027C44403A24C

Amount of Each Receipt this Period
1200.00

C. Kimberley A. Kemper
Full Name (Last, First, Middle Initial)

Mailing Address 100 Painted Horse

City Waco State TX Zip Code 76712-8851

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Farm Bureau Insurance Companies Occupation Vice President, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 18 / 2014
Transaction ID : 20140318163432-3

Amount of Each Receipt this Period
50.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1305.00 |
| 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: (check only one) | PAGE 23 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Tom Litjen
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 N Capitol St NW
 Ste 801
 City Washington State DC Zip Code 20001-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Vice President, Federal Government Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014
Transaction ID : 20140312171932-32
 Amount of Each Receipt this Period
 104.17

B. Tom Litjen
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 N Capitol St NW
 Ste 801
 City Washington State DC Zip Code 20001-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Vice President, Federal Government Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2014
Transaction ID : 20140328180615-32
 Amount of Each Receipt this Period
 104.17

C. James P. Loring Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Amica Way
 City Lincoln State RI Zip Code 02865-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amica Mutual Group Occupation Senior Vice President, Chief Financial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : B975168D6C592751276
 Amount of Each Receipt this Period
 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 808.34
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: (check only one) | PAGE 24 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Patrick O. Lynch | | Date of Receipt |
| Mailing Address 4000 W 114th St Ste 300 | | M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 |
| City Leawood | State KS | Zip Code 66211-2622 |
| FEC ID number of contributing federal political committee. | C | Transaction ID : B3CBABB783634BEF86B8 |
| Name of Employer California Casualty Group | Occupation Senior Vice President - Mgr of Custome | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | 240.00 |
| | | 240.00 |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Deirdre Manna | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 |
| City Chicago | State IL | Zip Code 60631-3512 |
| FEC ID number of contributing federal political committee. | C | Transaction ID : 20140312171932-35 |
| Name of Employer PCI | Occupation Vice President, Political Engagement & | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | 50.00 |
| | | 300.00 |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Deirdre Manna | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014 |
| City Chicago | State IL | Zip Code 60631-3512 |
| FEC ID number of contributing federal political committee. | C | Transaction ID : 20140328180615-35 |
| Name of Employer PCI | Occupation Vice President, Political Engagement & | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | 50.00 |
| | | 300.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| 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: (check only one) | PAGE 25 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Scott Markel
Full Name (Last, First, Middle Initial)

Mailing Address 1 Geico Ctr

City Macon State GA Zip Code 31295-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 18 / 2014
Transaction ID : **9A30EB29B03FCF33C56**

Amount of Each Receipt this Period
600.00

B. Mike McCormick
Full Name (Last, First, Middle Initial)

Mailing Address 4000 W 114th St Ste 300

City Leawood State KS Zip Code 66211-2622

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 14 / 2014
Transaction ID : **A5DDB5C5EB1AD207C76**

Amount of Each Receipt this Period
300.00

C. James E. McDermott
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Vice President and General Mana

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
03 / 10 / 2014
Transaction ID : **9588B3FA72174D18B293**

Amount of Each Receipt this Period
480.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1380.00

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: (check only one) | PAGE 26 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

Mailing Address 1 Geico Plz

City Washington State DC Zip Code 20046-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer **GEICO** Occupation **Senior Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2014

Transaction ID : 6EC95057865E37B4175

Amount of Each Receipt this Period
600.00

B. Peter E. Moreau
Full Name (Last, First, Middle Initial)

Mailing Address 25 Amica Way

City Lincoln State RI Zip Code 02865-1166

FEC ID number of contributing federal political committee. **C**

Name of Employer **Amica Mutual Group** Occupation **Vice President and Chief Information O**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2014

Transaction ID : 65F2B734AB4A5567E55

Amount of Each Receipt this Period
480.00

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

Mailing Address 1900 Alameda De Las Pulgas
Department Pd-1

City San Mateo State CA Zip Code 94403-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer **California Casualty Group** Occupation **Vice President, Underwriting and Produ**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2014

Transaction ID : 15048A27946D4BBBAC48

Amount of Each Receipt this Period
250.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1330.00 |
| 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: (check only one) | PAGE 27 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. John W. Mullen
Full Name (Last, First, Middle Initial)

Mailing Address 1281 Murfreesboro Pike

City Nashville State TN Zip Code 37217-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer Direct General Group Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 0934177C9A7B4B00B4F6

Amount of Each Receipt this Period
2750.00

B. Theodore C. Murphy
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Vice President - Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
03 / 13 / 2014
Transaction ID : D72C7A326B3933D7986

Amount of Each Receipt this Period
480.00

C. Hank Nayden
Full Name (Last, First, Middle Initial)

Mailing Address 1 Geico Plz

City Washington State DC Zip Code 20046-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation Vice President and Legislative Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 18 / 2014
Transaction ID : 58C4D7BA94E9454AF76

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3830.00

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: (check only one) | PAGE 28 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Joanne M. Orfanos
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Senior Vice President, Membership and
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2014
Transaction ID : 20140312171932-42
 Amount of Each Receipt this Period 50.00

B. Joanne M. Orfanos
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Senior Vice President, Membership and
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2014
Transaction ID : 20140328180615-42
 Amount of Each Receipt this Period 50.00

C. Gregory V. Ostergren
 Full Name (Last, First, Middle Initial)
 Mailing Address 5154 S Chelsea Ave
 City Springfield State MO Zip Code 65804-7711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American National Property and Casualt Occupation Chairman, President and Chief Executiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 24 / 2014
Transaction ID : 20140324185029-8
 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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: (check only one) | PAGE 29 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Rick W. Parks
Full Name (Last, First, Middle Initial)
Mailing Address 150 Camelot Dr
City Fond Du Lac State WI Zip Code 54935-8030
FEC ID number of contributing federal political committee. **C**
Name of Employer Society Insurance - A Mutual Company Occupation President and Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014
Transaction ID : EF2E16613234479689CB
Amount of Each Receipt this Period 1000.00

B. John Pham
Full Name (Last, First, Middle Initial)
Mailing Address 750 Woodbury Rd
City Woodbury State NY Zip Code 11797-2519
FEC ID number of contributing federal political committee. **C**
Name of Employer GEICO Occupation Assistant Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 21 / 2014
Transaction ID : 3F07005DCE4E47CB8765
Amount of Each Receipt this Period 600.00

C. Dan D. Pitcher
Full Name (Last, First, Middle Initial)
Mailing Address 2508 Country Side Pl
City West Des Moines State IA Zip Code 50265-7641
FEC ID number of contributing federal political committee. **C**
Name of Employer FBL Financial Group Occupation Chief Operating Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014
Transaction ID : 20140321183622-12
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
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: (check only one) | PAGE 30 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. William M. Puryear
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Candus Cove
 City State Zip Code
 China Spring TX 76633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Farm Bureau Insurance Companies Manager - Insurance Company Transition
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : 20140318163432-5
 Amount of Each Receipt this Period
 50.00

B. Paul A. Pyne
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Amica Way
 City State Zip Code
 Lincoln RI 02865-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Amica Mutual Group Executive Vice President and Chief Ope
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : A5798E31A8510021F12
 Amount of Each Receipt this Period
 2700.00

C. Michael A. Ray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Alameda De Las Pulgas
 City State Zip Code
 San Mateo CA 94403-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 California Casualty Group Executive Vice President, Chief Financ
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2014
Transaction ID : 7D624128CF4B436EB7CB
 Amount of Each Receipt this Period
 600.00

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3350.00 |
| 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: (check only one) | PAGE 31 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Robert P. Restrepo Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 518 E Broad St
 City Columbus State OH Zip Code 43215-3901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Auto Insurance Companies Occupation President, Chairman and Chief Executiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : A41DC1AF8FC643AEB7E4
 Amount of Each Receipt this Period
 5000.00

B. George W. Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 9091
 City Macon State GA Zip Code 31208-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation Regional Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : F27DF137721615AE816
 Amount of Each Receipt this Period
 500.00

c. Doug R. Roggenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address 3955 Pitt Rd
 City Waterford State MI Zip Code 48328-1144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2014
Transaction ID : 20140327144055-47
 Amount of Each Receipt this Period
 30.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5530.00 |
| 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: (check only one) | PAGE 32 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

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

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.46

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-46

Amount of Each Receipt this Period
208.08

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

Mailing Address 444 N Capitol St NW
Ste 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.46

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-46

Amount of Each Receipt this Period
208.08

C. Daniel S. Schechter
Full Name (Last, First, Middle Initial)

Mailing Address 1 Geico Plz

City Washington State DC Zip Code 20046-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation Assistant Vice President Staff Develop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 18 / 2014
Transaction ID : FC1FEDB0CC2475BC35B

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 716.16

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: (check only one) | PAGE 33 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Trey Schneider
Full Name (Last, First, Middle Initial)
Mailing Address 5429 Edinburgh Dr
City Waco State TX Zip Code 76710-1233
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas Farm Bureau Insurance Companies Occupation Director of Insurance Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.50

Date of Receipt 03 / 18 / 2014
Transaction ID : 20140318163432-6
Amount of Each Receipt this Period 42.50

B. William A. Schwab
Full Name (Last, First, Middle Initial)
Mailing Address 10 Amica Center Blvd
City Lincoln State RI Zip Code 02865-1165
FEC ID number of contributing federal political committee. **C**
Name of Employer Amica Mutual Group Occupation Human Resources Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 04 / 2014
Transaction ID : 63D42F57B173BA998CE
Amount of Each Receipt this Period 240.00

C. Mark Sektnan
Full Name (Last, First, Middle Initial)
Mailing Address 1415 L St Ste 670
City Sacramento State CA Zip Code 95814-3964
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2014
Transaction ID : 20140312171932-47
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 332.50
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: (check only one) | PAGE 34 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Mark Sektnan
Full Name (Last, First, Middle Initial)

Mailing Address 1415 L St
Ste 670

City Sacramento State CA Zip Code 95814-3964

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Vice President, State Government Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-47

Amount of Each Receipt this Period
50.00

B. Edmund Shallcross
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
03 / 10 / 2014
Transaction ID : D03097545F734584AAA3

Amount of Each Receipt this Period
240.00

C. Lynne F. Siegel
Full Name (Last, First, Middle Initial)

Mailing Address 1500 SW 5th Ave

City Portland State OR Zip Code 97201-5458

FEC ID number of contributing federal political committee. **C**

Name of Employer California Casualty Group Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
03 / 21 / 2014
Transaction ID : 661065C92BD8476EBFF6

Amount of Each Receipt this Period
480.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 770.00

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: (check only one) | PAGE 35 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Oyango Snell
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Counsel, State Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-50
Amount of Each Receipt this Period
50.00

B. Oyango Snell
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Counsel, State Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-50
Amount of Each Receipt this Period
50.00

C. David Snyder
Full Name (Last, First, Middle Initial)
Mailing Address 444 N Capitol St NW
Ste 801
City Washington State DC Zip Code 20001-1508
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, International Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-51
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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: (check only one) | PAGE 36 OF 57 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|----------|---|
| Full Name (Last, First, Middle Initial) A. David Snyder | | Date of Receipt |
| Mailing Address 444 N Capitol St NW Ste 801 | | M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014 |
| City Washington | State DC | Zip Code 20001-1508 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 20140328180615-51 |
| Name of Employer PCI | | Amount of Each Receipt this Period |
| Occupation Vice President, International Policy | | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | 300.00 |

| | | |
|---|----------|---|
| Full Name (Last, First, Middle Initial) B. Robert P. Suglia | | Date of Receipt |
| Mailing Address Lincoln Center Boulevard | | M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014 |
| City Lincoln | State RI | Zip Code 02940-6008 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : D07C32620FA6ED9353B |
| Name of Employer Amica Mutual Group | | Amount of Each Receipt this Period |
| Occupation Assistant Vice President | | 600.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | 600.00 |

| | | |
|---|----------|---|
| Full Name (Last, First, Middle Initial) C. Marguerite Tortorello | | Date of Receipt |
| Mailing Address 8700 W Bryn Mawr Ave Ste 1200S | | M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 |
| City Chicago | State IL | Zip Code 60631-3512 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 20140312171932-55 |
| Name of Employer PCI | | Amount of Each Receipt this Period |
| Occupation Senior Vice President, Public Affairs | | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | 300.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 700.00 |
| 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: (check only one) | PAGE 37 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Marguerite Tortorello
 Full Name (Last, First, Middle Initial)
 Mailing Address 8700 W Bryn Mawr Ave
 Ste 1200S
 City Chicago State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PCI Occupation Senior Vice President, Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2014
Transaction ID : 20140328180615-55
 Amount of Each Receipt this Period
 50.00

B. Edward H. Wagner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1259 Dorchester Rd
 City Birmingham State MI Zip Code 48009-5995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amerisure Companies Occupation Chief Underwriting Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014
Transaction ID : 20140327144055-59
 Amount of Each Receipt this Period
 30.00

C. Timothy A. Walsh
 Full Name (Last, First, Middle Initial)
 Mailing Address 344 Route 9W
 City Glenmont State NY Zip Code 12077-2910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Farm Family Casualty Insurance Company Occupation President, Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : 20140310170916-1
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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: (check only one) | PAGE 38 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Timothy A. Walsh
Full Name (Last, First, Middle Initial)

Mailing Address 344 Route 9W

City State Zip Code
Glenmont NY 12077-2910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Farm Family Casualty Insurance Company President, Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 20 / 2014
Transaction ID : 20140320182006-1

Amount of Each Receipt this Period
50.00

B. Ann Weber
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City State Zip Code
Chicago IL 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PCI Vice President, State Government Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-56

Amount of Each Receipt this Period
50.00

C. Ann Weber
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave
Ste 1200S

City State Zip Code
Chicago IL 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PCI Vice President, State Government Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-56

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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: (check only one) | PAGE 39 OF 57 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Sean F. Welch
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Senior Assistant Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 17 / 2014
Transaction ID : 8375BC91B40487FDCF

Amount of Each Receipt this Period 240.00

B. Deborah Wensel
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Senior Vice President, Chief Financial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 12 / 2014
Transaction ID : 20140312171932-57

Amount of Each Receipt this Period 100.00

C. Deborah Wensel
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bryn Mawr Ave Ste 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer PCI Occupation Senior Vice President, Chief Financial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 28 / 2014
Transaction ID : 20140328180615-57

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00

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: (check only one) | PAGE 40 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Nathaniel Wienecke | | Date of Receipt |
| Mailing Address 444 N Capitol St NW Ste 801 | | <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City Washington State DC Zip Code 20001-1508 | | Transaction ID : 20140312171932-58 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer PCI Occupation Senior Vice President, Federal Governm | | <input type="text" value="167.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="1002.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Nathaniel Wienecke | | Date of Receipt |
| Mailing Address 444 N Capitol St NW Ste 801 | | <input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City Washington State DC Zip Code 20001-1508 | | Transaction ID : 20140328180615-58 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer PCI Occupation Senior Vice President, Federal Governm | | <input type="text" value="167.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="1002.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Robert L. Wilborn | | Date of Receipt |
| Mailing Address 9000 Chapel Rd Apt 18204 | | <input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> |
| City Waco State TX Zip Code 76712-8746 | | Transaction ID : 20140304121417-8 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Texas Farm Bureau Insurance Companies Occupation Insurance Executive | | <input type="text" value="100.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="500.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="434.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 41 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Robert L. Wilborn
Full Name (Last, First, Middle Initial)

Mailing Address 9000 Chapel Rd
Apt 18204

City Waco State TX Zip Code 76712-8746

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Farm Bureau Insurance Companies Occupation Insurance Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 18 / 2014
Transaction ID : 20140318163432-8

Amount of Each Receipt this Period
100.00

B. Maribeth Q. Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 100 Amica Way

City Lincoln State RI Zip Code 02865-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Amica Mutual Group Occupation Vice President and Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
03 / 17 / 2014
Transaction ID : A1F6A38F53247EBD35C

Amount of Each Receipt this Period
240.00

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

Mailing Address 180 Genesee St

City New Hartford State NY Zip Code 13413-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer Utica National Insurance Group Occupation Insurance Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 24 / 2014
Transaction ID : FC6DC43B30A74F45AF2C

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 840.00

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: (check only one) | PAGE 42 OF 57 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Joe Woods
Full Name (Last, First, Middle Initial)
Mailing Address 1504 San Antonio St
City Austin State TX Zip Code 78701-1613
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 12 / 2014
Transaction ID : 20140312171932-59
Amount of Each Receipt this Period
50.00

B. Joe Woods
Full Name (Last, First, Middle Initial)
Mailing Address 1504 San Antonio St
City Austin State TX Zip Code 78701-1613
FEC ID number of contributing federal political committee. **C**
Name of Employer PCI Occupation Vice President, State Government Relat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 28 / 2014
Transaction ID : 20140328180615-59
Amount of Each Receipt this Period
50.00

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
/ /
Amount of Each Receipt this Period

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| TOTAL This Period (last page this line number only).....▶ | 47295.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

A. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Association of America

Mailing Address 8700 West Bryn Mawr Ave

City Chicago State IL Zip Code 60631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2876.85

Date of Receipt
 03 / 28 / 2014
Transaction ID : 8935F321EF994C869F36

Amount of Each Receipt this Period
2361.18

Offset to Operating Exp March 2014

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2361.18 |
| TOTAL This Period (last page this line number only).....▶ | 2361.18 |

**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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
BoA CC Fees 03-03-14

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 9A818F9B318A93A2100

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 03-06-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 2204D176219343BA0BE

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 03-10-2014

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 621CC09E65E99E70144

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 03-11-2014

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 03 | | | 11 | | | 2014 | | | |

Transaction ID : 7B685B50375E607F3DC

Amount of Each Disbursement this Period

| |
|-------|
| 59.94 |
|-------|

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 03-13-2014

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 03 | | | 13 | | | 2014 | | | |

Transaction ID : 25A3118608A9399AF37

Amount of Each Disbursement this Period

| |
|-------|
| 73.12 |
|-------|

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Merchant CC Fee 03-17-2014

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 03 | | | 17 | | | 2014 | | | |

Transaction ID : EDB421D35485E291A33

Amount of Each Disbursement this Period

| |
|-------|
| 17.28 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 150.34 |
|--------|

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

| |
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| |
|--|

**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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 21 | / | 2014 |

Mailing Address 135 S LaSalle Street, 7th Floor

Transaction ID : C535D5AF6282A3CB177

City Chicago State IL Zip Code 60603

Amount of Each Disbursement this Period

| |
|-------|
| 85.92 |
|-------|

Purpose of Disbursement
Merchant CC Fee 03-21-2014

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Bank of America

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 25 | / | 2014 |

Mailing Address 135 S LaSalle Street, 7th Floor

Transaction ID : 22B77C8D29CA524BB91

City Chicago State IL Zip Code 60603

Amount of Each Disbursement this Period

| |
|------|
| 4.18 |
|------|

Purpose of Disbursement
Merchant CC Fee 03-25-2014

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Mailing Address

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

City State Zip Code

Purpose of Disbursement

| |
|-------------------|
| |
| Category/ Type |

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 90.10 |
|-------|

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

| |
|---------|
| 2361.18 |
|---------|

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Capito for West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement
2014 Primary

011

Candidate Name

Shelley Moore Capito

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Transaction ID : 855D118B9C8106EF8B6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Capito for West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement
2014 General

011

Candidate Name

Shelley Moore Capito

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Transaction ID : B8B3128C27ADB629617

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Capito for West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement
2014 Primary

011

Candidate Name

Shelley Moore Capito

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Transaction ID : DE2DAD8F2AA60E5E72C

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

8000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Capuano for Congress Committee

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Michael Everett Capuano

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 2 | | 2 | 0 | 1 | 4 |

Transaction ID : CDABF3888243BC5E9B3

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Cathy McMorris Rodgers for Congress

Mailing Address Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Cathy McMorris Rodgers

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 0 | | 2 | 0 | 1 | 4 |

Transaction ID : 924FEB93094EF839FB5

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Cleaver for Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Emanuel Cleaver II

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 05

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 2 | | 2 | 0 | 1 | 4 |

Transaction ID : 1F8202D79F8AA5D50BA

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

| | | | | | | |
|---|---|---|---|---|---|---|
| 6 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

| | | | | | | |
|---|---|---|---|---|---|---|
| 6 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Congressional Black Caucus PAC

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Congressional Black Caucus PAC

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2014

Transaction ID : 4893405F670DD61ED8A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Bill Posey

Mailing Address PO Box 411486

City Melbourne State FL Zip Code 32941

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Bill Posey

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 08

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : 31E576F9A11F461DB4A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of Dave Joyce

Mailing Address 320 Kenarden Drive

City Cleveland State OH Zip Code 44143-3710

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

David P. Joyce

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : CE0725B34CE1EBA45D0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Dave Joyce

Mailing Address 320 Kenarden Drive

City Cleveland State OH Zip Code 44143-3710

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

David P. Joyce

Office Sought: House
 Senate
 President
State: OH District: 14

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2014

Transaction ID : 780B4A17EB7E5E73980

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dave Joyce

Mailing Address 320 Kenarden Drive

City Cleveland State OH Zip Code 44143-3710

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

David P. Joyce

Office Sought: House
 Senate
 President
State: OH District: 14

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2014

Transaction ID : 9EBB3EBA70B6613AEE5

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Dennis Ross

Mailing Address 133 South Harbor Drive

City Venice State FL Zip Code 34285

Purpose of Disbursement
2014 General

011
Category/
Type

Candidate Name

Dennis A. Ross

Office Sought: House
 Senate
 President
State: FL District: 15

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : D0B5EC6CD631B870956

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Patrick Joseph Toomey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : 34F9C4E1E2A8F91203F

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Friends of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Patrick Joseph Toomey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : 76CB94542C96CD52EA8

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Friends of Susan Brooks

Mailing Address 9425 N Meridian Street
237

City Indianapolis State IN Zip Code 46260-1308

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Susan W. Brooks

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Transaction ID : ADA5489DC9BFA28C4DD

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Heartland Values PAC

Mailing Address PO Box 505

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Heartland Values PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : 3C50DB71740E6926296

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Heidi for Senate

Mailing Address PO Box 1577

City State Zip Code
Bismarck ND 58502-1577

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Heidi Heitkamp

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) **Contribution**

State: ND District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : FA15060F523D222FAFE

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. John Carney for Congress

Mailing Address PO Box 2162

City State Zip Code
Wilmington DE 19899

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

John Charles Carney Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: DE District: 01

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2014

Transaction ID : BACEEB11B6EF58DD5CB

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. John Carney for Congress

Mailing Address PO Box 2162

City State Zip Code
Wilmington DE 19899

Purpose of Disbursement
2014 Primary

Category/
Type

Candidate Name

John Charles Carney Jr.

Office Sought: House
 Senate
 President
State: DE District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : E8A0FD23CD802B9785A

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Lizbeth Benacquisto for Congress

Mailing Address 610 S Boulevard

City State Zip Code
Tampa FL 33606

Purpose of Disbursement
2014 Primary

Category/
Type

Candidate Name

Lizbeth Benacquisto

Office Sought: House
 Senate
 President
State: FL District: 19

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 723AD5170BB6903C402

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Luke Messer for Congress

Mailing Address PO Box 917

City State Zip Code
Shelbyville IN 46176

Purpose of Disbursement
2014 Primary

Category/
Type

Candidate Name

Allan Lucas Messer

Office Sought: House
 Senate
 President
State: IN District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EA63918A8BB9D9333F0

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. People for Pearce

Mailing Address PO Box 2696

City Hobbs State NM Zip Code 88241-2696

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Stevan E. Pearce

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 02

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Transaction ID : 020731FECDD3B13D544

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Reed Committee

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Jack Francis Reed

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: RI District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : B66D7B7524D44571D78

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116-0581

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Mike J. Rogers

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : D13B9893DF1AB97D4A2

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Mike Stack

Mailing Address P.O. Box 292

City Newtown State PA Zip Code 18940

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 5 | | 2 | 0 | 1 | 4 |

Transaction ID : B1490624EFC0C9CE6AC

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. French for Justice

Mailing Address 100 S. Third Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 0 | | 2 | 0 | 1 | 4 |

Transaction ID : B2C20E5D3CA0605468D

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. Joe Hune for State Senate Committee

Mailing Address 4849 Hogback Road

City Fowlerville State MI Zip Code 48836

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 4 | | 2 | 0 | 1 | 4 |

Transaction ID : CF3E0BAA87D0D588EBC

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

**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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

Full Name (Last, First, Middle Initial)

A. Texans for Dan Patrick

Mailing Address 1 East Greenway Plaza
Suite 225

City Houston State TX Zip Code 77046

Purpose of Disbursement
Nonfederal Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 4D9E20EF19B642AEB2C

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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