

**FEC
FORM 3X**

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

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00336834

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

4. TYPE OF REPORT (Choose One)	(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	April 15 Quarterly Report(Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
	July 15 Quarterly Report(Q2)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)	
	October 15 Quarterly Report(Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)	
	January 31 Quarterly Report(YE)	Convention (12C)	Special (12G)			
	<input checked="" type="checkbox"/> July 31 Mid-Year Report(Non-election Year Only) (MY)	Election on			in the State of	
	Termination Report (TER)	(d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
		Election on			in the State of	

5. Covering Period 01 01 2003 through 06 30 2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael L. Wiseman

Signature of Treasurer Electronically Filed by Michael L. Wiseman Date 07 23 2003

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

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

Report Covering the Period: From: ^M01 ^D01 ^Y2003 To: ^M06 ^D30 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^M ^D		4848.22
(b) Cash on Hand at Beginning of Reporting Period	4848.22	
(c) Total Receipts (from Line 19)	10942.60	10942.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15790.82	15790.82
<hr/>		
7. Total Disbursements (from Line 31)	7577.00	7577.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8213.82	8213.82
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
<hr/>		
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: ^M01 ⁻01 ⁻2003 To: ^N06 ⁻30 ⁻2003

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)	6292.00	
(ii) Unitemized	4641.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10933.00	10933.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10933.00	10933.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	9.60	9.60
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 Transfer (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))	10942.60	10942.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10942.60	10942.60

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	27.00	27.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	27.00	27.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1100.00	1100.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	6450.00	6450.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared 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 ActMty (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))..	7577.00	7577.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7577.00	7577.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	10933.00	10933.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10933.00	10933.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27.00	27.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27.00	27.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 16	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. John J. Bishop		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 1390 Picardae Court		Transaction ID: SA11A1.5148
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 650.00
Name of Employer Motorists Mutual Insurance Company	Occupation Chairman, President and CEO	Payroll Deduction \$50 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. John D. Coffman		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 7042 Tralee Drive		Transaction ID: SA11A1.5152
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 221.00
Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$17 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

Full Name (Last, First, Middle Initial) C. Daniel L. Crawford		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 6323 Cook Road		Transaction ID: SA11A1.5155
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$25 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	1196.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 16	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Craig G. Eberwine		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 142B Sedgefield Dr.		Transaction ID: SA11A1.5157
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$25 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. David L. Kaufman		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 7925 Greengside Lane		Transaction ID: SA11A1.5167
City Worthington	State OH	Zip Code 43235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 390.00
Name of Employer Motorists Mutual Insurance Company	Occupation Sr. Vice President, CIO	Payroll Deduction \$30 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. John C. Keeler		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 391D Caswell Road		Transaction ID: SA11A1.5168
City Johnstown	State OH	Zip Code 43031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$20 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	975.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 16	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Orville R. Lyons, II		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 1185 Starbuck Ct		Transaction ID: SA11A1.5174
City Westerville	State OH	Zip Code 43081
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 351.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$27 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) B. Thomas C. Ogg		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 10187 Chelton Wood		Transaction ID: SA11A1.5177
City Powell	State OH	Zip Code 43085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 520.00
Name of Employer Motorists Mutual Insurance Company	Occupation Secretary	Payroll Deduction \$40 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Randolph A. Rudowicz		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 1026 Loch Ness Avenue		Transaction ID: SA11A1.5179
City Worthington	State OH	Zip Code 43085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll Deduction \$25 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	1196.00
TOTAL This Period (last page this line number only)	

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

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

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

A. Karen L. Schwartz Full Name (Last, First, Middle Initial) Mailing Address 1252 Pond Hollow Lane City State Zip Code New Albany OH 43054		Date of Receipt M / D / Y 06 / 30 / 2003 Transaction ID: SA11A1.5181 Amount of Each Receipt this Period 325.00 Payroll Deduction \$25 Bi-weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 325.00
Name of Employer Motorists Mutual Insurance Company Occupation Vice President Receipt For: Primary General Other (specify) ▼		

B. Charles D. Stapleton Full Name (Last, First, Middle Initial) Mailing Address 5878 Albany Trace City State Zip Code Westerville OH 43081		Date of Receipt M / D / Y 06 / 30 / 2003 Transaction ID: SA11A1.5183 Amount of Each Receipt this Period 325.00 Payroll Deduction \$25 Bi-weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 325.00
Name of Employer Motorists Mutual Insurance Company Occupation Senior Vice President Receipt For: Primary General Other (specify) ▼		

C. Duane Swartz Full Name (Last, First, Middle Initial) Mailing Address 1505 Clubview Blvd., S. City State Zip Code Columbus OH 43235		Date of Receipt M / D / Y 06 / 30 / 2003 Transaction ID: SA11A1.5184 Amount of Each Receipt this Period 390.00 Payroll Deduction \$30 Bi-weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 390.00
Name of Employer Motorists Mutual Insurance Company Occupation Senior Vice President Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1040.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 16	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. James E. Vermilion		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 919 Byron Avenue		Transaction ID: SA11A1.5185
City Columbus	State OH	Zip Code 43227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 455.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$35 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Full Name (Last, First, Middle Initial) B. Richard J. Walton		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 3249 Sciabo Run Blvd.		Transaction ID: SA11A1.5186
City Hilliard	State OH	Zip Code 43026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$25 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Peter A. Weisenberger		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 7105 Lakabrook Blvd.		Transaction ID: SA11A1.5187
City Columbus	State OH	Zip Code 43235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll Deduction \$20 Bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	1040.00
TOTAL This Period (last page this line number only)	

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

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

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

A. Charles A. Wickert Full Name (Last, First, Middle Initial) Mailing Address 1228 Smiley Court City State Zip Code Westerville OH 43081		Date of Receipt M / D / Y 06 / 30 / 2003 Transaction ID: SA11A1.5188 Amount of Each Receipt this Period 390.00 Payroll Deduction \$30 Bi-weekly
FEC ID number of contributing federal political committee. C		
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 390.00	

B. Michael L. Wiseman Full Name (Last, First, Middle Initial) Mailing Address 90 Timberknoll Loop City State Zip Code Powell OH 43065		Date of Receipt M / D / Y 06 / 30 / 2003 Transaction ID: SA11A1.5190 Amount of Each Receipt this Period 455.00 Payroll Deduction \$35 Bi-weekly
FEC ID number of contributing federal political committee. C		
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Treasurer Aggregate Year-to-Date ▼ 455.00	

SUBTOTAL of Receipts This Page (optional)	845.00
TOTAL This Period (last page this line number only)	6292.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

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

Full Name (Last, First, Middle Initial) A. ACLI PAC		Transaction ID: SB23.5196 Date of Disbursement 04 / 16 / 2003	
Mailing Address 101 Constitution Ave., NW Suite 700		Amount of Each Disbursement this Period 100.00	
City Washington	State DC		Zip Code 20001-2133
Purpose of Disbursement Federal Political Contribution			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. NAMIC CAP Program		Transaction ID: SB23.5191 Date of Disbursement 01 / 10 / 2003	
Mailing Address 122 C Street, NW, Suite 540		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC		Zip Code 20001
Purpose of Disbursement Federal PAC Contribution			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 / 16	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

Full Name (Last, First, Middle Initial) A. Citizens for Gardner		Transaction ID: SB29.5219 Date of Disbursement 05 / 06 / 2003		
Mailing Address 431 North Prospect Street		Amount of Each Disbursement this Period 500.00		
City Bowling Green	State OH			Zip Code 43402
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 Primary X General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) B. Citizens for Geoffrey C. Smith		Transaction ID: SB29.5216 Date of Disbursement 04 / 15 / 2003		
Mailing Address 1479 Cliff Court #B		Amount of Each Disbursement this Period 1000.00		
City Columbus	State OH			Zip Code 43204
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) C. Citizens for Larry Wolpert		Transaction ID: SB29.5205 Date of Disbursement 03 / 26 / 2003		
Mailing Address 100 South Third Street		Amount of Each Disbursement this Period 150.00		
City Columbus	State OH			Zip Code 43215
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼	State: District		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 14 / 16	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

Full Name (Last, First, Middle Initial) A. Citizens for White		Transaction ID: SB29.5217 Date of Disbursement 04 / 25 / 2003		
Mailing Address 5212 Sugar Maple Drive		Amount of Each Disbursement this Period 150.00		
City Dayton	State OH			Zip Code 45440
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) B. Committee for Bob Gibbs		Transaction ID: SB29.5213 Date of Disbursement 04 / 08 / 2003		
Mailing Address 6992 TWP Road 466		Amount of Each Disbursement this Period 150.00		
City Lakewood	State OH			Zip Code 44636
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 X Primary General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) C. Committee to Elect Armbruster		Transaction ID: SB29.5220 Date of Disbursement 05 / 06 / 2003		
Mailing Address 33030 Woodhaven Circle		Amount of Each Disbursement this Period 500.00		
City North Ridgeville	State OH			Zip Code 44039
Purpose of Disbursement State Political Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 Primary X General Other (specify) ▼	State: District		

SUBTOTAL of Disbursements This Page (optional)	800.00
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)	PAGE 15 / 16
	<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)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Friends of Jim Raussen		Transaction ID: SB29.5209 Date of Disbursement 03 / 26 / 2003
Mailing Address 529 Observatory Drive		Amount of Each Disbursement this Period 150.00
City Cincinnati	State OH Zip Code 45246	
Purpose of Disbursement State Political Contribution	Candidate Name	
Office Sought: House Senate President		
State: District	Category/Type	

Full Name (Last, First, Middle Initial) B. Friends of Jim Raussen		Transaction ID: SB29.5221 Date of Disbursement 06 / 11 / 2003
Mailing Address 529 Observatory Drive		Amount of Each Disbursement this Period 500.00
City Cincinnati	State OH Zip Code 45246	
Purpose of Disbursement State Political Contribution	Candidate Name	
Office Sought: House Senate President		
State: District	Category/Type	

Full Name (Last, First, Middle Initial) C. LIFE PAC		Transaction ID: SB29.5204 Date of Disbursement 01 / 27 / 2003
Mailing Address 100 South Third Street		Amount of Each Disbursement this Period 750.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement State PAC Contribution	Candidate Name	
Office Sought: House Senate President		
State: District	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	▶	1400.00
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)

PAGE 16 / 16

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

Full Name (Last, First, Middle Initial) A. OIPAC		Transaction ID: SB29.5203 Date of Disbursement 01 / 27 / 2003	
Mailing Address 172 East State Street P. O. Box B16			
City Columbus	State OH	Zip Code 43216	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement State PAC Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2003 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Republican Senate Campaign Committee		Transaction ID: SB29.5218 Date of Disbursement 05 / 06 / 2003	
Mailing Address 211 South Fifth Street			
City Columbus	State OH	Zip Code 43216	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement State Political Contribution		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: 2003 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	2600.00
TOTAL This Period (last page this line number only)	▶	6450.00