STATEMENT OF

FORM 1	ORGANIZAT (See instructions)	ION	Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Government E	mployees Insurance Company Politi	cal Action Committee	
ADDRESS (number and	Street) One GEICO Plaza		
(Check if address			
is changed)	Washington		DC 20076 - 111
	CIT	Y▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	L ADDRESS (Please provide only one e-mail a	address)	
(Check if address is changed)	mcampbell@geico.com		
is changed)			
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if address			
is changed)	1		
2. DATE 0.2	D D / Y Y Y Y Y Y Y Z 2 0 1 0		
3. FEC IDENTIFICA	TION NUMBER C	C00343749	
4. IS THIS STATEM	NEW (N) OR	AMENDED (A)	
I certify that I have exam	ned this Statement and to the best of my knowledg	ge and belief it is true, correct and	d complete
Type or Print Name of	Treasurer Michael Campbell		
Signature of Treasurer	Electronically Filed by Michael Camp	bbell	Date 02 / 22 / YYYYY
NOTE: Submission of fa	se, erroneous, or incomplete information may sub		•
Office Use Only		For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

	F	EC F	Form 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name Candid			
	Candid Party /	date Affiliati	Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candi			
	Party	Comn		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politic	cal Act	tion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
			X Corporation Corporation w/o Capital Stock La	bor Organization
			Membership Organization Trade Association C	ooperative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint F	undra	alsing Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. FEC ID number	
			3. FEC ID number	
			EEC ID number C	

	FEC Form 1 (Revised 02	2/2009)		Page 3
W	rite or Type Committee Name			
	Government Employees	s Insurance Company Political	Action Committee	
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joi	nt Fundraising Representative, or I	_eadership PAC Sponsor
L	Government Employees	Insurance Company		
	Mailing Address	One GEICO Plaza		
		Washington	DC DC	20076
		CITY▲	STATE ▲	ZIP CODE 🛦
	Relationship:			
	X Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
7.	Custodian of Records: Ide possession of Committee	entify by name, address, (phone n books and records.	number optional), and position	of the person in
	Full Name Michae	l Campbell		
	Mailing Address	12534 Ansin Circle	e Drive	
		Potomac		20854
	Title or Position ♥	CITY A	STATE	ZIP CODE A
	Treasurer		Telephone number	01 - 986 - 3162
8.		and address (phone number op designated agent (e.g., assistant		mmittee; and the
	Full Name of Treasurer Michae	el Campbell		
	Mailing Address	12534 Ansin Circle	e Drive	
	g 			
		Potomac		20854
	Title or Position ♥	CITY &	STATE	ZIP CODE A
	Treasurer		Telephone number	01 _ 986 _ 3162

FEC Form 1 (Revised	1 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
	Tele	phone number	
9. Banks or Other Depositor safety deposit boxes or mail	ies: List all banks or other depositories in which the ntains funds.	committee deposits funds, ho	lds accounts, rents
Name of Bank, Depository,	etc.		
M &	T Bank		
Mailing Address	1 Research Court		
	Rockville	MD L	20850 _
	CITY 🗻	STATE △	ZIP CODE 🛕
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🙇	STATE ⊿	ZIP CODE 🛕

Banks or Other Depositories: safety deposit boxes or maintain		mittee deposits funds, holds	accounts, rents
Name of Bank, Depository, etc.		[ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE. △	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Re	epresentative, or Leaders	[ADDITIONAL] hip PAC Sponsor
ACME Brick Company G	ood Government Fund for Federal Elections		
Mailing Address	P.O. Box 425		
	Fort Worth	L	76101
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising R	epresentative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE₄	ZIP CODE A
	Telep	phone number	
Joint Fundraiser Participant			[ADDITIONAL]
		FEC ID number	

Banks or Other Depositories: safety deposit boxes or maintain		mmittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising I	Representative, or Leaders	[ADDITIONAL] ship PAC Sponsor
BNSF Railway Company	RAILPAC (BNSF RAILPAC)		
Mailing Address	P.O. Box 961039		
	Fort Worth		76161
elationship:	CITY▲	STATE 🛦	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising	Representative Lead	lership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
		ephone number	
Joint Fundraiser Participant			[ADDITIONAL]
		FEC ID number C	

s funds.		
		[ADDITIONAL]
CITY 🛕	STATE ⊿	ZIP CODE 🛕
enization, Affiliated Committee, Joint Fundraising Repre	esentative, or Lead	[ADDITIONAL] dership PAC Sponsor
ederal Political Action Committee		
4747 McLane Parkway		
Temple	」	76503
CITY	STATE A	ZIP CODE
X Affiliated Committee Joint Fundraising Repre	esentative L	eadership PAC Sponsor
		[ADDITIONAL]
CITY A	- ——STATE.	
CITY A Telephon		
		ZIP CODE &
	anization, Affiliated Committee, Joint Fundraising Represederal Political Action Committee 4747 McLane Parkway Temple CITY	anization, Affiliated Committee, Joint Fundraising Representative, or Leadederal Political Action Committee 4747 McLane Parkway Temple TX STATE

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the commi	ttee deposits funds, ho	lds accounts, rents
Name of Bank, Depository, etc.	, rando.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE_	ZIP CODE 🛕
	nization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leade	[ADDITIONAL] ership PAC Sponsor
Mailing Address	P.O. Box 657		
	Des Moines		50306
delationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Rep	presentative Lea	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE. ▲	ZIP CODE A
	Telepho	one number	
Joint Fundraiser Participant			[ADDITIONAL]
	FE	EC ID number	

Banks or Other Depositories: safety deposit boxes or maintain		mittee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address	1		
			-
	OLTY -	CTATE -	7ID 00DE -
	CITY 🗻	STATE ∡	ZIP CODE 🛕
MidAmerican Energy Co Mailing Address	P. O. Box 657		
	Des Moines	LIA L	50306
lationship:	CITY	STATE A	ZIP CODE 🛦
Connected Organization	X Affiliated Committee Joint Fundraising R	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE₄	ZIP CODE A
	Telep	phone number	
Joint Fundraiser Participant			[ADDITIONAL]
		FEC ID number C	
		I LO ID HUITIDEI	

safety deposit boxes or maint Name of Bank, Depository, e			[ADDITIONAL]
rvanic or bank, bepository, c	io.		-
Mailing Address			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
-	rganization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leade	[ADDITIONAL rship PAC Sponsor
PacifiCorp/MidAmeric	an Political Action Committee		
Mailing Address	825 N E Multnomah, Suite 2000 LCT		
	Portland	J OR L	97232
ationship:	СІТУ▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repre	esentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Designated Agent Full Name			[ADDITIONAL]
I			[ADDITIONAL]
Full Name			[ADDITIONAL]
Full Name			[ADDITIONAL]
Full Name	CITY A	STATE	[ADDITIONAL]
Full Name L L L	CITY A Telephon		

Banks or Other Depositories: safety deposit boxes or maintain	List all banks or other depositories in which the committee s funds.	e deposits funds, h	nolds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address		1 1 1 1 1 1	
	- , , , , , , , , , , , , , , , , , , ,	1 1 1 1 1 1	
			-
	CITY 🛕	STATE. <u>⊿</u>	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repres	sentative, or Lead	[ADDITIONAL dership PAC Sponsor
Mailing Address	P. O. Box 272		
		1 1 1 1 1	
	Alexander City	AL	35011
elationship:	CITY	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repres	sentative L	eadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE ∆	ZIP CODE A
	Telephone	number	
Joint Fundraiser Participant			[ADDITIONAL]
	FEC	ID number C	