

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
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

ADDRESS (number and street) ONE MASSACHUSETTS AVE NW SUITE 800
 Check if different than previously reported. (ACC)
WASHINGTON DC 20001

2. **FEC IDENTIFICATION NUMBER** C00172833
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2009 through 06 30 2009

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 R. McLeod

Signature of Treasurer Electronically Filed by Michael R. McLeod Date 09 12 2011

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									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	X	Y	Y	Y	2	0	0	9		48824.32
X	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	40194.11									
(c) Total Receipts (from Line 19)	70975.51	84345.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	111169.62	133169.62								
7. Total Disbursements (from Line 31)	34100.00	56100.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	77069.62	77069.62								
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

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

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)	39640.00	48990.00
(ii) Unitemized	31295.00	35285.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	70935.00	84275.00
(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)	70935.00	84275.00
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.)	40.51	70.30
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))	70975.51	84345.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70975.51	84345.30

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	34000.00	56000.00
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.....	100.00	100.00
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 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))..	34100.00	56100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34100.00	56100.00

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)	70935.00	84275.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70935.00	84275.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 37
	<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

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial) Jimmy Armistead		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 2124 Memorial Dr		Transaction ID: SA11AI.6056
City Clarksville	State TN	Zip Code 37043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Valley Crop Ins	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Scott Arnold		Date of Receipt MM / DD / YYYY 04 / 13 / 2009
Mailing Address 1507 Alderwood Dr SW		Transaction ID: SA11AI.6044
City Altoona	State IA	Zip Code 50009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Rain & Hail, LLC	Occupation Marketing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Jas Bains		Date of Receipt MM / DD / YYYY 06 / 02 / 2009
Mailing Address 4227 Fortna Road		Transaction ID: SA11AI.6116
City Yaba City	State CA	Zip Code 95993
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NAU Country Insurance	Occupation Adjuster	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	800.00
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: PAGE 7 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
Rick Bird

Mailing Address 9 N. Madison

City State Zip Code
Emmetsburg IA 50536

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Great American Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.6110

Amount of Each Receipt this Period 245.00

B. Full Name (Last, First, Middle Initial)
Diane R Bjerke

Mailing Address 113 17th Ave West

City State Zip Code
West Fargo ND 58078

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Valley Crop Insurance Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
06 / 24 / 2009

Transaction ID: SA11AI.6141

Amount of Each Receipt this Period 500.00

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

Mailing Address 2723 Pomona Drive

City State Zip Code
Eau Claire WI 54701

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 FCIA Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
06 / 03 / 2009

Transaction ID: SA11AI.6065

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 995.00

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 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) William Brewer	Date of Receipt MM / DD / YYYY 06 / 07 / 2009
	Mailing Address 622 Beth Drive	Transaction ID: SA11AI.6124
	City State Zip Code Great Falls MT 59405	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Prairie Mountain Ins Inc. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Jerry L Britten	Date of Receipt MM / DD / YYYY 06 / 26 / 2009
	Mailing Address 68045 120th St	Transaction ID: SA11AI.6146
	City State Zip Code Zearing IA 50278	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self employed Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Scott Bruhn	Date of Receipt MM / DD / YYYY 04 / 09 / 2009
	Mailing Address 2108 Center Street	Transaction ID: SA11AI.6081
	City State Zip Code West Des Moines IA 50265-2229	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail Senior Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 / 37
	<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

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Greg K. Burger	Date of Receipt MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 1209 Amanda Ct	Transaction ID: SA11AI.6051
	City State Zip Code Eau Claire WI 54703	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer North Central Crop Insurance Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Steve Carthel	Date of Receipt MM / DD / YYYY 04 / 01 / 2009
	Mailing Address 6606 Roxton	Transaction ID: SA11AI.6033
	City State Zip Code Amarillo TX 79109	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Rain & Hail, LLC Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Douglas A Clark	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 298 S. 4th Street	Transaction ID: SA11AI.6059
	City State Zip Code Sheldon IL 60966	Amount of Each Receipt this Period 245.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Owner Occupation Clark Insurance Agency Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional)	1745.00
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 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Dean Clarke	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 5225 Wayne Trace Road	Transaction ID: SA11AI.6114
	City State Zip Code Hamilton OH 45011	Amount of Each Receipt this Period 245.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Great American Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00	

B.	Full Name (Last, First, Middle Initial) Jim Colville	Date of Receipt MM / DD / YYYY 06 / 10 / 2009
	Mailing Address 524 North First St.	Transaction ID: SA11AI.6125
	City State Zip Code Harrison MI 48625	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation JC Colville Crop Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Jay G. Conlon	Date of Receipt MM / DD / YYYY 04 / 01 / 2009
	Mailing Address 5515 Blue Jay Lane	Transaction ID: SA11AI.6034
	City State Zip Code Great Falls MT 59404	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail, LLC Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	745.00
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: PAGE 11 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial) Donald F Connealy		Date of Receipt MM / DD / YYYY 04 / 14 / 2009
Mailing Address 206 Ridgewood Drive		Transaction ID: SA11AI.6045
City Council Bluffs	State IA	Zip Code 51503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 245.00
Name of Employer Agro National	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

B.

Full Name (Last, First, Middle Initial) Michael Connealy		Date of Receipt MM / DD / YYYY 06 / 10 / 2009
Mailing Address 463 Waycliffe North		Transaction ID: SA11AI.6071
City Wayzata	State MN	Zip Code 55391
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Producers Ag Insurance	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Timothy D Copeland		Date of Receipt MM / DD / YYYY 05 / 07 / 2009
Mailing Address 10866 Arcaro Lane		Transaction ID: SA11AI.6061
City Union	State KY	Zip Code 41091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 495.00
Name of Employer Great American Ins Co	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

SUBTOTAL of Receipts This Page (optional)	▶	1240.00
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: PAGE 12 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Brad Darling
 Mailing Address 5005 Forest Hill Dr
 City State Zip Code
 Monroe GA 30655
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 0 9
Transaction ID: SA11AI.6109
 Amount of Each Receipt this Period
 245.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rain & Hail Occupation Claims/QC Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

B. Full Name (Last, First, Middle Initial)
 James Deal
 Mailing Address 16191 Makah St NW
 City State Zip Code
 Anoka MN 55303
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 9
Transaction ID: SA11AI.6107
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAU Country Insurance Occupation Business owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
 Dan Delano
 Mailing Address 18608 Lamont Street
 City State Zip Code
 Omaha NE 68130
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 3 / 2 0 0 9
Transaction ID: SA11AI.6043
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rain & Hail, LLC Occupation Asst. VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2245.00
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: PAGE 13 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Jay W Domer
 Mailing Address 4235 NW Green Hills Road
 City State Zip Code
 Topeka KS 66618
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 9
Transaction ID: SA11AI.6091
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAU Country Insurance Regional Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Shurlene Donaho
 Mailing Address PO Box 826
 City State Zip Code
 Raymondville TX 78580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 9 / 2 0 0 9
Transaction ID: SA11AI.6070
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Donaho Insurance Agent
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
 Robert Dow
 Mailing Address 1527 Dogwood Rd
 City State Zip Code
 Xenia IL 62899
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 9 / 2 0 0 9
Transaction ID: SA11AI.6087
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Producers Ag Compliance Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
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: PAGE 14 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
J.R. Estes

Mailing Address 48 Willow Drive

City Winchesta State KY Zip Code 40391

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

Name of Employer Producers Ag Occupation Compliance Supv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.6088

Amount of Each Receipt this Period
 250.00

B.

Full Name (Last, First, Middle Initial)
Richard S. Fagley

Mailing Address 1585 Searight Drive

City Pleasant Hill State IA Zip Code 50327

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

Name of Employer Rain & Hail Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.6040

Amount of Each Receipt this Period
 500.00

C.

Full Name (Last, First, Middle Initial)
Chris Fisher

Mailing Address 4305 159th Street

City Urbandale State IA Zip Code 50323

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

Name of Employer Great American Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.6074

Amount of Each Receipt this Period
 500.00

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 15 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Steven Fleece		Date of Receipt MM / DD / YYYY 06 / 23 / 2009		
	Mailing Address 7748 Quail Creek Trace		Transaction ID: SA11AI.6140		
	City Pittsboro	State IN	Zip Code 46167	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fleece Insurance	Occupation Agent	Aggregate Year-to-Date 245.00		

B.	Full Name (Last, First, Middle Initial) Gary Flynn		Date of Receipt MM / DD / YYYY 06 / 15 / 2009		
	Mailing Address 1785 W Eddy Rd		Transaction ID: SA11AI.6137		
	City Sandusky	State MI	Zip Code 48471	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Michael Sahr Crop Ins	Occupation Agent	Aggregate Year-to-Date 245.00		

C.	Full Name (Last, First, Middle Initial) Ronald Gerstenberger		Date of Receipt MM / DD / YYYY 06 / 15 / 2009		
	Mailing Address 229 W Forester Road		Transaction ID: SA11AI.6135		
	City Sandusky	State MI	Zip Code 48471	Amount of Each Receipt this Period 495.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Michael Sahr Ins Agency	Occupation Agent	Aggregate Year-to-Date 495.00		

SUBTOTAL of Receipts This Page (optional)	▶	985.00
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 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Kim R. Gibson	Date of Receipt MM / DD / YYYY 04 / 29 / 2009
	Mailing Address 21765 Greenview Road	Transaction ID: SA11AI.6052
	City State Zip Code Council Bluffs IA 51503	Amount of Each Receipt this Period 995.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Agro National Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 995.00	

B.	Full Name (Last, First, Middle Initial) Rick Gibson	Date of Receipt MM / DD / YYYY 06 / 07 / 2009
	Mailing Address 535 West Broadway	Transaction ID: SA11AI.6068
	City State Zip Code Council Bluffs IA 51503	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Agro National, LLC Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Charles L. Goode	Date of Receipt MM / DD / YYYY 04 / 01 / 2009
	Mailing Address 704 Davidson Street	Transaction ID: SA11AI.6035
	City State Zip Code Raleigh NC 27609	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail, LLC Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2395.00
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: PAGE 17 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Gary Gray

Mailing Address 7509 N City Rd 200 E

City State Zip Code
Frankfort IN 46041

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

Name of Employer Occupation
Crop Insurance Specialists Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2009

Transaction ID: SA11AI.6145

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Lee R. Gutknecht

Mailing Address Box 156

City State Zip Code
Howard Lake MN 55349

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

Name of Employer Occupation
North Central Crop Ins. State Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.6050

Amount of Each Receipt this Period
350.00

C.

Full Name (Last, First, Middle Initial)
Delaine Hanson

Mailing Address 1191 O Avenue

City State Zip Code
Villisca IA 50864

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

Name of Employer Occupation
Self employed Ag sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2009

Transaction ID: SA11AI.6139

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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: PAGE 18 / 37

(check only one)

<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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Larry Heitman

Mailing Address PO Box 8628

City State Zip Code
Woodland CA 95695

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

Name of Employer Occupation
California Crop Ins Svcs Executive VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6049

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Dennis Keifer

Mailing Address 1866 Cleveland Avenue

City State Zip Code
Charles City IA 50616

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

Name of Employer Occupation
NAU Country Insurance VP Branch Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6089

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)

Steve Keiser

Mailing Address 88653 Highway 81

City State Zip Code
Fordyce NE 68736

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

Name of Employer Occupation
self-employed insurance agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 995.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.6080

Amount of Each Receipt this Period
995.00

SUBTOTAL of Receipts This Page (optional)

1995.00

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 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Michael Kelley	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 3910 Brockton Drive	Transaction ID: SA11AI.6060
	City State Zip Code Cincinnati OH 45251	Amount of Each Receipt this Period 395.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Great American Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	

B.	Full Name (Last, First, Middle Initial) Jerry D. Kincade	Date of Receipt MM / DD / YYYY 04 / 01 / 2009
	Mailing Address PO Box 254	Transaction ID: SA11AI.6036
	City State Zip Code Winterset IA 50273	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail, LLC VP & Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Roger Kleweno	Date of Receipt MM / DD / YYYY 06 / 16 / 2009
	Mailing Address PO Box 37	Transaction ID: SA11AI.6138
	City State Zip Code Burlington CO 80807	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Colorado Federal Agency, Inc. Insurance Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5795.00
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: PAGE 20 / 37

(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Elliott L. Konschak

Mailing Address 752 142nd Lane NW

City State Zip Code
Andover MN 55304

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NAU Country Insurance Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.6047

Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
James Korin

Mailing Address 7938 Maple Hill Rd

City State Zip Code
Corcoran MN 55340

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NAU Country Insurance CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.6102

Amount of Each Receipt this Period 1000.00

C.

Full Name (Last, First, Middle Initial)
Brian J. Laird

Mailing Address 501 W. Enterprise Ave.

City State Zip Code
Clovis CA 93611

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Rain & Hail Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt MM / DD / YYYY
04 / 29 / 2009

Transaction ID: SA11AI.6053

Amount of Each Receipt this Period 395.00

SUBTOTAL of Receipts This Page (optional) 2395.00

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: PAGE 21 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial) Jess Ben Latham		Date of Receipt MM / DD / YYYY 06 / 07 / 2009
Mailing Address Box 229		Transaction ID: SA11AI.6067
City Amarillo	State TX	Zip Code 79105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Producers Lloyds Ins Co	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) James Leonhard		Date of Receipt MM / DD / YYYY 05 / 29 / 2009
Mailing Address 6250 N. Hwy. 94		Transaction ID: SA11AI.6115
City Portage Des Sioux	State MO	Zip Code 63373
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 295.00
Name of Employer Leonhard Insurance	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

C.

Full Name (Last, First, Middle Initial) Michael H Lewis		Date of Receipt MM / DD / YYYY 06 / 10 / 2009
Mailing Address 24903 Woods Drive		Transaction ID: SA11AI.6072
City Denton	State MD	Zip Code 21629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Insurance, Inc.	Occupation Agency Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1545.00
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: PAGE 22 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Robert J Lindsay
 Mailing Address 213 North Hooker
 City State Zip Code
 Nora Springs IA 50458
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 9
Transaction ID: SA11AI.6148
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAU Country Insurance Adjuster
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Jeff Malcom
 Mailing Address 2300 Liberty Hill Church Rd
 City State Zip Code
 Monroe GA 30655
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 0 9
Transaction ID: SA11AI.6054
 Amount of Each Receipt this Period
 395.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rain & Hail, LLC Vice President
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 395.00

C. Full Name (Last, First, Middle Initial)
 Mark A Masters
 Mailing Address 416 4th Ave. South
 City State Zip Code
 Great Falls MT 59403
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 9
Transaction ID: SA11AI.6099
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAU Country Insurance Claims Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► **895.00**
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: PAGE 23 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

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

Mailing Address 458 Lake Road NE

City State Zip Code
Lancaster OH 43130

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

Name of Employer Producers Ag Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2009

Transaction ID: SA11AI.6055

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Ryan D. Miller

Mailing Address 3417 Eula Drive

City State Zip Code
Urbandale IA 50322

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

Name of Employer Rain & Hail, LLC Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
MM / DD / YYYY
04 / 14 / 2009

Transaction ID: SA11AI.6046

Amount of Each Receipt this Period
395.00

C.

Full Name (Last, First, Middle Initial)
Eddie Mitchell

Mailing Address PO Box 796

City State Zip Code
Altus OK 73521

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

Name of Employer Eddie Mitchell Ins Agency Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2009

Transaction ID: SA11AI.6123

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **895.00**

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: PAGE 24 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Mark O Mossman
 Mailing Address 11295 240th Avenue
 City State Zip Code
 Zimmerman MN 55398
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 9
Transaction ID: SA11AI.6090
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAU Country Insurance VP Claims
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Mark O Mossman
 Mailing Address 11295 240th Avenue
 City State Zip Code
 Zimmerman MN 55398
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 5 / 2 0 0 9
Transaction ID: SA11AI.6108
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAU Country Insurance VP Claims
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
 Danny D Mostad
 Mailing Address 9315 Manilla Rd
 City State Zip Code
 Langdon ND 58249
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 6 / 2 0 0 9
Transaction ID: SA11AI.6147
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mostad Ins Services Agent
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 750.00
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 / 37
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) August G Nelson		Date of Receipt																					
	Mailing Address 774 S. Blaine		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	5		2	0	0	9														
	City State Zip Code Minden NE 68959		Transaction ID: SA11AI.6136																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Nelson Agency, Inc. Occupation: Ins Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 995.00		995.00																						

B.	Full Name (Last, First, Middle Initial) Carey O'Dell		Date of Receipt																					
	Mailing Address 515 NE 44th Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		0	9		2	0	0	9														
	City State Zip Code Ankeny IA 50021		Transaction ID: SA11AI.6041																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Rain & Hail Insurance Occupation: Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		500.00																						

C.	Full Name (Last, First, Middle Initial) Barry Olson		Date of Receipt																					
	Mailing Address 1820 Prairie Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		0	2		2	0	0	9														
	City State Zip Code Fargo ND 58103		Transaction ID: SA11AI.6119																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: NAU Country Insurance Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		500.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1995.00
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: PAGE 26 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Terry L. Peniston
 Mailing Address 1024 Watermill Lane
 City Lexington State KY Zip Code 40515
 Date of Receipt 05 / 08 / 2009
Transaction ID: SA11AI.6062
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FCIA Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
 Jim Percy
 Mailing Address 1340 York Drive
 City Blackfoot State ID Zip Code 83221
 Date of Receipt 04 / 03 / 2009
Transaction ID: SA11AI.6038
 Amount of Each Receipt this Period 995.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Conquest Insurance Agency Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 995.00

C. Full Name (Last, First, Middle Initial)
 Colleen Peterson
 Mailing Address 3630 Suchla Ct
 City Eau Claire State WI Zip Code 54701
 Date of Receipt 04 / 24 / 2009
Transaction ID: SA11AI.6101
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAU Country Insurance Occupation MPCI Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► **2245.00**
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: PAGE 27 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Kevin Powers

Mailing Address 1853 County Road 11

City State Zip Code
Panhandle TX 79068

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

Name of Employer Rain & Hail Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2009

Transaction ID: SA11AI.6037

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Jo Rogers

Mailing Address 4731 Highway 54

City State Zip Code
Pine Bluff AR 71603

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

Name of Employer Delta Farm Service Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2009

Transaction ID: SA11AI.6134

Amount of Each Receipt this Period
245.00

C.

Full Name (Last, First, Middle Initial)
Steve Schou

Mailing Address 1919 W 39th Street

City State Zip Code
Kearney NE 68845

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

Name of Employer NAU Country Insurance Occupation Adjuster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.6098

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **745.00**

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: PAGE 28 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

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

Mailing Address PO Box 1087

City State Zip Code
Sterling CO 80751

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

Name of Employer: Sonnenberg Agency Occupation: Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 04 / 2009
Transaction ID: SA11AI.6039
Amount of Each Receipt this Period: 1000.00

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

Mailing Address 3054 Coonpath Rd.

City State Zip Code
Carroll OH 43112

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

Name of Employer: Pro Ag Occupation: Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 24 / 2009
Transaction ID: SA11AI.6103
Amount of Each Receipt this Period: 250.00

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

Mailing Address 421 36th Avenue NE

City State Zip Code
Great Falls MT 59404

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

Name of Employer: Farmers Crop Ins Alliance Occupation: Operations Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 24 / 2009
Transaction ID: SA11AI.6048
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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: PAGE 29 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Randall L. Thomas

Mailing Address 3505 149th Street

City Urbandale State IA Zip Code 50323

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

Name of Employer Rain & Hail, LLC Occupation VP - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 09 / 2009
Transaction ID: SA11AI.6042
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Robert J. Twomey

Mailing Address 1346 Covedale Lane

City Amelia State OH Zip Code 45102

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

Name of Employer Great American Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 26 / 2009
Transaction ID: SA11AI.6076
 Amount of Each Receipt this Period: 250.00

C.

Full Name (Last, First, Middle Initial)
Brad Veenstra

Mailing Address 1242 145th St

City Pella State IA Zip Code 50219

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

Name of Employer Great American Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 03 / 2009
Transaction ID: SA11AI.6066
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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: PAGE 30 / 37
(check only one)

<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Dale Vogt

Mailing Address 3412 Golf Road

City Eau Claire State WI Zip Code 54701

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

Name of Employer FCIA Occupation Asst. Claims Adjuster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 995.00

Date of Receipt 05 / 07 / 2009

Transaction ID: SA11AI.6058

Amount of Each Receipt this Period 995.00

B.

Full Name (Last, First, Middle Initial)
Tim Weber

Mailing Address 49 E. Fourth Street, Suite 400-N

City Cincinnati State OH Zip Code 45202

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

Name of Employer Great American Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2009

Transaction ID: SA11AI.6075

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Steven J. Wedel

Mailing Address 3712 S. Morrill

City Spokane State WA Zip Code 99223

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

Name of Employer Rain & Hail LLC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2009

Transaction ID: SA11AI.6057

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 1895.00

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:	PAGE 31 / 37
	(check only one)	
<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Ross Wehling		Date of Receipt
	Mailing Address 7230 Alhambra Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 18 / 2009
	City	State	Zip Code
	Alhambra	IL	62001
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6064
Name of Employer Heartland Crop Insurance		Occupation Agent	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 ▼	<input type="text"/> 245.00

B.	Full Name (Last, First, Middle Initial) Joel F. Weiss		Date of Receipt
	Mailing Address 6319 SW 23rd St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 12 / 2009
	City	State	Zip Code
	Topeka	KS	66614
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6063
Name of Employer Blakely Crop Hail, Inc.		Occupation VP, Marketing	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 ▼	<input type="text"/> 495.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 740.00
TOTAL This Period (last page this line number only)	<input type="text"/> 39640.00

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)

<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

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
13TH COLONY LEADERSHIP COMMITTEE, INC.

Mailing Address P. O. Box 114

City Savannah State GA Zip Code 31402

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.6017

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement

Candidate Name
BLANCHE LAMBERT LINCOLN

Category/Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.6007

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement

Candidate Name
BLANCHE LAMBERT LINCOLN

Category/Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.6008

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

3000.00

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

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: SB23.6011 Date of Disbursement 04 / 30 / 2009
	Mailing Address 18 N. SECOND ST., BOX 37 PO BOX 37	Amount of Each Disbursement this Period 1000.00
	City SAINT CLAIR State PA Zip Code 17970	
	Purpose of Disbursement	Category/Type
	Candidate Name TIM HOLDEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF ROSA DELAURO	Transaction ID: SB23.6006 Date of Disbursement 04 / 22 / 2009
	Mailing Address 12 TRUMBULL STREET	Amount of Each Disbursement this Period 5000.00
	City NEW HAVEN State CT Zip Code 06511	
	Purpose of Disbursement	Category/Type
	Candidate Name ROSA DELAURO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JIM COSTA FOR CONGRESS	Transaction ID: SB23.6028 Date of Disbursement 06 / 25 / 2009
	Mailing Address 2037 W Bullard Avenue # 355	Amount of Each Disbursement this Period 1000.00
	City Fresno State CA Zip Code 93711	
	Purpose of Disbursement	Category/Type
	Candidate Name JIM MR. COSTA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) LATTA FOR CONGRESS	Transaction ID: SB23.6030 Date of Disbursement 05 / 07 / 2009
	Mailing Address 300 North Main Street	Amount of Each Disbursement this Period 1000.00
	City Bowling Green State OH Zip Code 43402	
	Purpose of Disbursement	Category/Type
	Candidate Name ROBERT EDWARD LATTA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS	Transaction ID: SB23.6009 Date of Disbursement 05 / 06 / 2009
	Mailing Address Post Office Box 1726 Post Office Box 1726	Amount of Each Disbursement this Period 4000.00
	City Oklahoma City State OK Zip Code 73101	
	Purpose of Disbursement	Category/Type
	Candidate Name FRANK D LUCAS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS	Transaction ID: SB23.6010 Date of Disbursement 05 / 06 / 2009
	Mailing Address Post Office Box 1726 Post Office Box 1726	Amount of Each Disbursement this Period 1000.00
	City Oklahoma City State OK Zip Code 73101	
	Purpose of Disbursement	Category/Type
	Candidate Name FRANK D LUCAS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

PAGE 35 / 37

<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

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) MIKE MCINTYRE FOR CONGRESS	Transaction ID: SB23.6013 Date of Disbursement 05 / 20 / 2009
	Mailing Address P.O. Box 1	Amount of Each Disbursement this Period 1000.00
	City Lumberton State NC Zip Code 28359	
	Purpose of Disbursement	Category/Type
	Candidate Name MIKE MCINTYRE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MORAN FOR KANSAS	Transaction ID: SB23.6004 Date of Disbursement 04 / 21 / 2009
	Mailing Address P.O. Box 1151	Amount of Each Disbursement this Period 4500.00
	City Hays State KS Zip Code 67601	
	Purpose of Disbursement	Category/Type
	Candidate Name JERRY MORAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MORAN FOR KANSAS	Transaction ID: SB23.6005 Date of Disbursement 04 / 21 / 2009
	Mailing Address P.O. Box 1151	Amount of Each Disbursement this Period 500.00
	City Hays State KS Zip Code 67601	
	Purpose of Disbursement	Category/Type
	Candidate Name JERRY MORAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) PAT ROBERTS FOR SENATE	Transaction ID: SB23.6003 Date of Disbursement 04 / 01 / 2009	
	Mailing Address PO BOX 433		
	City GREAT BEND State KS Zip Code 67530	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement	Category/Type	
	Candidate Name PAT ROBERTS		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: KS District: 00		
B.	Full Name (Last, First, Middle Initial) PAT ROBERTS VICTORY COMMITTEE; THE	Transaction ID: SB23.6029 Date of Disbursement 06 / 18 / 2009	
	Mailing Address 610 S BOULEVARD		
	City TAMPA State FL Zip Code 33606	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement	Category/Type	
	Candidate Name PAT ROBERTS		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: KS District: 00		
C.	Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS	Transaction ID: SB23.6015 Date of Disbursement 06 / 09 / 2009	
	Mailing Address 26192 Floyd Lake Point Road		
	City Detroit Lakes State MN Zip Code 56501	Amount of Each Disbursement this Period	1500.00
	Purpose of Disbursement	Category/Type	
	Candidate Name COLLIN CLARK PETERSON		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MN District: 07		

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS	Transaction ID: SB23.6151 Date of Disbursement 06 / 09 / 2009
	Mailing Address 26192 Floyd Lake Point Road	Amount of Each Disbursement this Period 3500.00
	City Detroit Lakes State MN Zip Code 56501	Category/ Type
	Purpose of Disbursement	
Candidate Name COLLIN CLARK PETERSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA	Transaction ID: SB23.6021 Date of Disbursement 06 / 23 / 2009
	Mailing Address PO Box 2009	Amount of Each Disbursement this Period 1000.00
	City Sioux Falls State SD Zip Code 57101	Category/ Type
	Purpose of Disbursement	
Candidate Name STEPHANIE HERSETH	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) TEAM EMERSON FOR JO ANN EMERSON	Transaction ID: SB23.6012 Date of Disbursement 05 / 14 / 2009
	Mailing Address P.O. Box 822 P.O. Box 822	Amount of Each Disbursement this Period 1000.00
	City Cape Girardeau State MO Zip Code 63702	Category/ Type
	Purpose of Disbursement	
Candidate Name JO ANN H EMERSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

34000.00