

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 01 01 2009 through 03 31 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 04 15 2009

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	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

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" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</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>	Y	Y	Y	Y	2	0	0	9		48824.32
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	48824.32									
(c) Total Receipts (from Line 19)	13369.79	13369.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62194.11	62194.11								
7. Total Disbursements (from Line 31)	22000.00	22000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40194.11	40194.11								
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:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	9350.00	9350.00
(i) Itemized (use Schedule A)	3990.00	3990.00
(ii) Unitemized	13340.00	13340.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13340.00	13340.00
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.)	29.79	29.79
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))	13369.79	13369.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13369.79	13369.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	22000.00	22000.00
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.....	0.00	0.00
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))..	22000.00	22000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22000.00	22000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	13340.00	13340.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13340.00	13340.00
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:	PAGE 6 / 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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. Black		Date of Receipt
	Mailing Address 6521 Cheslie Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 21 / 2009
	City	State	Zip Code
	Johnston	IA	50131
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5997
Name of Employer Rain & Hail, LLC		Occupation Asst Nat'l Claims Mgr	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"/> 295.00

B.	Full Name (Last, First, Middle Initial) Ron Brichler		Date of Receipt
	Mailing Address 1374 Camberly Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 13 / 2009
	City	State	Zip Code
	Cincinnati	OH	45215
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5990
Name of Employer Great American Insurance Co.		Occupation President-Crop Div.	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"/> 2500.00

C.	Full Name (Last, First, Middle Initial) Lindsey Burns		Date of Receipt
	Mailing Address 16110 630 W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 21 / 2009
	City	State	Zip Code
	Remington	IN	47977
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5996
Name of Employer C & L Burns, Inc.		Occupation Principal	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

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3040.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mark Classen		Date of Receipt
	Mailing Address 400 Navajo Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Medina	MN	55340
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6001
Name of Employer Rain & Hail, LLC		Occupation Vice President	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"/> 395.00

B.	Full Name (Last, First, Middle Initial) Danette Coleman		Date of Receipt
	Mailing Address 3514 Robin Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 18 / 2009
	City	State	Zip Code
	Salem	IL	62881
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5993
Name of Employer Crop Insurance Services		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

C.	Full Name (Last, First, Middle Initial) Michael Davenport		Date of Receipt
	Mailing Address 2935 Timberline Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Waukee	IA	50263
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6000
Name of Employer Rain & Hail, LLC		Occupation Attorney	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"/> 1135.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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

A.	Full Name (Last, First, Middle Initial) Greg J. Deal		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address PO Box 343		Transaction ID: SA11AI.5994		
	City Anoka	State MN	Zip Code 55303	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NAU Country Insurance Services	Occupation CEO	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) Raymond Froelick		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address PO Box 428		Transaction ID: SA11AI.5991		
	City Piper City	State IL	Zip Code 60959	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Great American Insurance	Occupation Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		245.00	

C.	Full Name (Last, First, Middle Initial) Robert Haney		Date of Receipt MM / DD / YYYY 03 / 21 / 2009		
	Mailing Address 1820 S 9th Lane		Transaction ID: SA11AI.5999		
	City West Des Moines	State IA	Zip Code 50265	Amount of Each Receipt this Period 995.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rain & Hail, LLC	Occupation Executive VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		995.00	

SUBTOTAL of Receipts This Page (optional)	▶	2240.00
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 9 / 15
(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
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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Steve Harms

Mailing Address 4120 Timberwood Dr

City State Zip Code
West Des Moines IA 50265

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

Name of Employer Rain & Hail, LLC Occupation Exec. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.5995

Amount of Each Receipt this Period
1000.00

B.

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

Mailing Address 6355 Wild Flower Place

City State Zip Code
Johnston IA 50131

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

Name of Employer Rain & Hail, LLC Occupation Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2009

Transaction ID: SA11AI.5998

Amount of Each Receipt this Period
395.00

C.

Full Name (Last, First, Middle Initial)
Ronnie Mayfield

Mailing Address 1992 E. 455th Rd.

City State Zip Code
Halfway MO 65663

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

Name of Employer Great Plains Agency Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2009

Transaction ID: SA11AI.5989

Amount of Each Receipt this Period
245.00

SUBTOTAL of Receipts This Page (optional) ► 1640.00

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 10 / 15
	(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

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

A.

Full Name (Last, First, Middle Initial) Kent Petersen		Date of Receipt
Mailing Address 26911 W. 108th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City State Zip Code Olathe KS 66061		<input type="text"/> 03 / <input type="text"/> 12 / <input type="text"/> 2009
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.5992
Name of Employer Hudson Insurance Co. Occupation Insurance Executive		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00
Aggregate Year-to-Date ▼ <input type="text"/> 1000.00		

B.

Full Name (Last, First, Middle Initial) Randall C White		Date of Receipt
Mailing Address 409 N. West Ave.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City State Zip Code Crooks SD 57020		<input type="text"/> 01 / <input type="text"/> 13 / <input type="text"/> 2009
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.5988
Name of Employer White Crop Insurance Occupation Owner		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 295.00
Aggregate Year-to-Date ▼ <input type="text"/> 295.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1295.00
TOTAL This Period (last page this line number only)	<input type="text"/> 9350.00

**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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Transaction ID: SB23.5976

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	9

Mailing Address POST OFFICE BOX 28001
PO BOX 28001

City RALEIGH State NC Zip Code 27611

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/ Type

Candidate Name
BOB ETHERIDGE

Office Sought: House
 Senate
 President
State: NC District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
BOSWELL FOR CONGRESS

Transaction ID: SB23.5980

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

Mailing Address PO Box 6220

City Des Moines State IA Zip Code 50309

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

Category/ Type

Candidate Name
LEONARD L. BOSWELL

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
EARL POMEROY FOR CONGRESS

Transaction ID: SB23.5972

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	9

Mailing Address PO Box 746

City Bismarck State ND Zip Code 58502

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

Category/ Type

Candidate Name
EARL RALPH POMEROY

Office Sought: House
 Senate
 President
State: ND District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
ELLSWORTH FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 62

City Evansville State IN Zip Code 47701

Purpose of Disbursement

Candidate Name
BRAD ELLSWORTH

Office Sought: House
 Senate
 President

State: IN District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5975

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

1500.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JACK KINGSTON

Mailing Address PO Box 2133
PO Box 2133

City Savannah State GA Zip Code 31402

Purpose of Disbursement

Candidate Name
JOHN HEDDENS KINGSTON

Office Sought: House
 Senate
 President

State: GA District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5971

Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN THUNE

Mailing Address 224 NORTH PHILLIPS AVENUE STE 210

City SIOUX FALLS State SD Zip Code 57104

Purpose of Disbursement

Candidate Name
JOHN THUNE

Office Sought: House
 Senate
 President

State: SD District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5977

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS <hr/> Mailing Address Post Office Box 1726 Post Office Box 1726 <hr/> City Oklahoma City State OK Zip Code 73101 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name FRANK D LUCAS Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input 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: OK District: 03	Transaction ID: SB23.5969 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 9	
	Amount of Each Disbursement this Period 1000.00	
	Full Name (Last, First, Middle Initial) MARION BERRY FOR CONGRESS <hr/> Mailing Address P.O. BOX 8084 P.O. BOX 8084 <hr/> City JONESBORO State AR Zip Code 72403 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name MARION BERRY Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input 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: AR District: 01	Transaction ID: SB23.5981 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00	
C. Full Name (Last, First, Middle Initial) MORAN FOR KANSAS <hr/> Mailing Address P.O. Box 1151 <hr/> City Hays State KS Zip Code 67601 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name JERRY MORAN Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input 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: 01	Transaction ID: SB23.5968 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 9	
	Amount of Each Disbursement this Period 500.00	

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

PATPAC

Mailing Address 5119A LEESBURG PIKE #292

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement

Candidate Name

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

Transaction ID: SB23.5974

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Road

City Detroit Lakes State MN Zip Code 56501

Purpose of Disbursement

Candidate Name COLLIN CLARK PETERSON

Office Sought: House Senate President
 Disbursement For: 2010 Primary General Other (specify) ▼
 State: MN District: 07

Transaction ID: SB23.5970

Date of Disbursement

03 / 04 / 2009

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA

Mailing Address PO Box 2009

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement

Candidate Name STEPHANIE HERSETH

Office Sought: House Senate President
 Disbursement For: 2010 Primary General Other (specify) ▼
 State: SD District: 00

Transaction ID: SB23.5979

Date of Disbursement

03 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

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)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

TIM WALZ FOR US CONGRESS

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement

Candidate Name
TIMOTHY J WALZ

Office Sought: House
 Senate
 President

State: MN District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.5978

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

22000.00