EDUCATORS MUTUAL LIFE

202 North Prince Street
P.O. Box 83149
Lancaster, PA 17608-3149

MAIN: 717 397-2751
FAX: 717 397-1821

RECEIVED
FEC MAIL ROOM
2002 FEB 19 P 1:49

January 23, 2002

Federal Election Committee
999 E Street, NW
Washington, DC 20463

Re: January 31 Year-End Federal Report

Enclosed you will find our January 31 Year-End Report for the period from July 1, 2001 to December 31, 2001. This filing includes the FEC Form 3X, Summary Page, Detailed Summary pages 3 and 4, Schedule A pages 5 and 6, Schedule B pages 7, 8, and 9.

Sincerely,

Kimberly A. Rankin

Kimberly A. Rankin
Treasurer
EML Political Action Committee

Enclosure

c: EMLPAC Federal File

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FEC MAIL ROOM
2002 FEB 19 P 1:49

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. — 12FE4M5

Educators Mutual Life Insurance Company PAC (EMLPAC)

ADDRESS (number and street) ▼ 202 North Prince Street

☐ Check if different than previously reported. (ADC) — PO Box 83149

Lancaster — PA — 17608-3149

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

C00294926

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ 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 (12S)

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 07 / 01 / 2001 through 12 / 31 / 2001

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: Kimberly A. Rankin

Signature of Treasurer: Kimberly A. Rankin — Date ___ / ___ / ___

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 (Revised 1/01)

FE1AN042

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Educators Mutual Life Insurance Company PAC (EMLPAC)

Report Covering the Period: From: 07 / 01 / 2001 To: 12 / 31 / 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		918614
(b) Cash on Hand at Beginning of Reporting Period	112992	
(c) Total Receipts (from Line 19)	115471	376849
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	124563	1295463
7. Total Disbursements (from Line 30)	40000	450000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	84563	845463
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Educators Mutual Life Insurance Company PAC (EMLPAC)

Report Covering the Period: From: 07 / 01 / 2001 To: 12 / 31 / 2001

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)	4,350.00	
(ii) Unitemized	719.71	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	1,154.71	3,768.49
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	1,154.71	3,768.49
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 38, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	1,154.71	3,768.49
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	1,154.71	3,768.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements	4000 00	4500 00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	4000 00	4500 00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	4000 00	4500 00

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	1154 71	3768 40
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	1154 71	3768 49
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶		

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 5 OF 9

[XX] 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)
Educators Mutual Life Insurance Company PAC (EMLPAC)

A.
Full Name (Last, First, Middle Initial): Ritter, Mark A.
Mailing Address: 726 Steeplechase Rd
City: Landisville | State: PA | Zip Code: 17538
FEC ID number of contributing federal political committee: C
Name of Employer: IBSi | Occupation: V.P. of Operations
Receipt For: [ ] Primary [ ] General [XX] Other (specify) ▼ Sundry
Aggregate Year-to-Date ▼ 378.00
Date of Receipt: PAYROLL DEDUCTIONS
Amount of Each Receipt this Period: 21.00 Per Pay

B.
Full Name (Last, First, Middle Initial): Fossi, Jr, Pete
Mailing Address: 687 Bent Creek Drive
City: Lititz | State: PA | Zip Code: 17543
FEC ID number of contributing federal political committee: C
Name of Employer: IBSi | Occupation: President
Receipt For: [ ] Primary [ ] General [XX] Other (specify) ▼ Sundry
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: PAYROLL DEDUCTIONS
Amount of Each Receipt this Period: 20.00 Per Pay

C.
Full Name (Last, First, Middle Initial): Luciotti III, Russell
Mailing Address: 1509 Woodland Street
City: Lebanon | State: PA | Zip Code: 17402
FEC ID number of contributing federal political committee: C
Name of Employer: Educators Mutual Life Insurance Company | Occupation: Director of I.T.
Receipt For: [ ] Primary [ ] General [XX] Other (specify) ▼ Sundry
Aggregate Year-to-Date ▼ 315.00
Date of Receipt: PAYROLL DEDUCTIONS
Amount of Each Receipt this Period: 17.50 Per Pay

SUBTOTAL of Receipts This Page (optional) ▶

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) [X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)

Educators Mutual Life Insurance Company PAC (EMLPAC)

A.

Full Name (Last, First, Middle Initial): Jack Muller

Mailing Address: 1809 Ridgeview Dr

City: Coatesville | State: PA | Zip Code: 19320

FEC ID number of contributing federal political committee: C

Name of Employer: Educators Mutual Life Insurance Company

Occupation: V.P. of Insurance Operations

Receipt For: [ ] Primary [ ] General [X] Other (specify) Sundry

Aggregate Year-to-Date: 252 00

Date of Receipt: PAYROLL DEDUCTIONS

Amount of Each Receipt this Period: 140 00 Per Pay

B.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: | State: | Zip Code:

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date:

Date of Receipt:

Amount of Each Receipt this Period:

C.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: | State: | Zip Code:

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date:

Date of Receipt:

Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 435 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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

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NAME OF COMMITTEE (In Full)
Educators Mutual Life Insurance Company PAC (EMLPAC)

A.
Full Name (Last, First, Middle Initial): Mike Sturla for State Representative
Mailing Address: PO Box 206
City: Lancaster State: PA Zip Code: 17608
Purpose of Disbursement: Sponsorship
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 07 / 26 / 2001
Amount of Each Disbursement this Period: 250 00

B.
Full Name (Last, First, Middle Initial): Friends of Charlie Smithgall
Mailing Address: C/O George Alspach 232 N Duke Street
City: Lancaster State: PA Zip Code: 17602
Purpose of Disbursement: Fundraiser
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 07 / 31 / 2001
Amount of Each Disbursement this Period: 250 00

C.
Full Name (Last, First, Middle Initial): Armstrong for Senate Committee
Mailing Address: PO Box 43
City: Refton State: PA Zip Code: 17568
Purpose of Disbursement: Sponsorship
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 08 / 28 / 2001
Amount of Each Disbursement this Period: 100 00

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

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NAME OF COMMITTEE (In Full)
Educators Mutual Life Insurance Company PAC (EMLPAC)

A.
Full Name (Last, First, Middle Initial): House Republican Campaign Committee
Mailing Address: PO Box 11787
City: Harrisburg State: PA Zip Code: 17108
Purpose of Disbursement: Fundraiser
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 09 / 25 / 2001
Amount of Each Disbursement this Period: 2000 00

B.
Full Name (Last, First, Middle Initial): Friends of Judge Eakin
Mailing Address: 1533 Johnnys Way
City: West Chester State: PA Zip Code: 19382
Purpose of Disbursement: Fundraiser
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 09 / 26 / 2001
Amount of Each Disbursement this Period: 250 00

C.
Full Name (Last, First, Middle Initial): Friends of Charlie Smithgall
Mailing Address: C/O George Alspach 232 N Duke Street
City: Lancaster State: PA Zip Code: 17602
Purpose of Disbursement: Fundraiser
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 09 / 26 / 2001
Amount of Each Disbursement this Period: 100 00

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

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NAME OF COMMITTEE (In Full)
Educators Mutual Life Insurance Company PAC (EMLPAC)

A.

Full Name (Last, First, Middle Initial): Friends of Charlie Smithgall
Mailing Address: C/O George Alspach 232 N Duke Street
City: Lancaster State: PA Zip Code: 17602
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 15 2001
Amount of Each Disbursement this Period: 500.00

B.

Full Name (Last, First, Middle Initial): PIPAC
Mailing Address: 1600 Market Street Suite 1520
City: Philadelphia State: PA Zip Code: 19103
Purpose of Disbursement: Fundraiser
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 22 2001
Amount of Each Disbursement this Period: 300.00

C.

Full Name (Last, First, Middle Initial): Mary Hannah Leavitt for Commonwealth Court Committee
Mailing Address: PO Box 11469
City: Harrisburg State: PA Zip Code: 17108-1469
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 24 2001
Amount of Each Disbursement this Period: 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 4,000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 1/23/02
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

LAP
PREPARER

2/19/02
DATE PREPARED

(6/2000)