PAGE 1 / 10

Image# 13964476701

**FEC** 

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3X	For Other Than An Aut	horized Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Example: If typing	ng, type	12FE4M5	555 555 511y	
COMMITTEE (in full)		over the lines.				
WILLIS NORTH A	MERICA INC POLITICAL	ACTION COM	MITTEE			
<u> </u>						
ADDRESS (number and stre	pet) 7 HANOVER SQUARE					
Check if different						
than previously reported. (ACC)	NEW YORK			NY	10004	
2. <b>FEC IDENTIFICATIO</b>	ON NUMBER ▼ CIT	Y.	S <sup>-</sup>	TATE 🛦	ZIP CODE ▲	
C C00418731			IEW N) <b>OR</b>	AM (A)	ENDED	
4. TYPE OF REPOR (Choose One)	Report	20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 2 (Non-El Year Or	20 (M11) lection
(a) Quarterly Reports:		20 (M3)	lun 20 (M6)	Sep :		20 (M12) lection
April 15	Apr	20 (M4)	lul 20 (M7)	Oct 2	20 (M10) Jan 3	1 (YE)
Quarterly Rep	port (Q1) (c) 12-Day	Primary (12P	)	General (	12G) Runof	f (12R)
July 15 Quarterly Rep	port (Q2)  PRE-Election Report for the:	Convention (	12C)	Special (1	128)	
October 15 Quarterly Rep	·	Convention (	.23)	opoolai (		
January 31 Year-End Re		on on	D   D / Y	Y	in the State of	
X July 31 Mid-\ Report (Non-\ Year Only) (N	election	General (300	i)	Runoff (3	0R) Specia	al (30S)
Termination F (TER)	Report Election	on on	D D / Y	YYY	in the State of	
5. Covering Period	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	M M M	/ 30 /	2013	
I certify that I have examin	ned this Report and to the best of	my knowledge and b	elief it is true	, correct and	complete.	
Type or Print Name of Tre	asurer Rob Eden					
Signature of Treasurer	Rob Eden	[Electronically	<i>Filed]</i> Da	te 07	/ 31 / 201;	3
NOTE: Submission of false,	erroneous, or incomplete informatio	n may subject the pers	on signing this	s Report to th	e penalties of 2 U.S.C.	§437g.
Office					FEC FORM 3	
Use Only					Rev. 12/2004	

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

2013 06 30 Report Covering the Period: 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33162.49 January 1, 2013 (b) Cash on Hand at 33162.49 Beginning of Reporting Period..... 1815.00 1815.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 34977.49 34977.49 6(a) and 6(c) for Column B)..... 1332.43 1332.43 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 33645.06 33645.06 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0 Schedule C and/or Schedule D) .....

For further information contact:

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

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From: 01		To: 06 30 2013
	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)	791.70	791.70
	(ii) Unitemized(iii) TOTAL (add	1023.30	1023.30
	Lines 11(a)(i) and (ii)▶	1815.00	1815.00
	(b) Political Party Committees	0	0
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry		
10	Totals to Line 33, page 5)▶  Transfers From Affiliated/Other	1815.00	1815.00
12.	Party Committees	0	0
13.	All Loans Received	0	0
	Loan Repayments Received Offsets To Operating Expenditures	0	0
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0	0
	to Federal Candidates and Other Political Committees	0	0
	Other Federal Receipts (Dividends, Interest, etc.)	0	0
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0	0
	(b) Levin Funds (from Schedule H5)	0	0
	(c) Total Transfers (add 18(a) and 18(b))	0	0
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	1815.00	1815.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	1815.00	1815.00

#### **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					
1. Operating Expenditures:	- Total Tills I criou	Galeridai Tear-IO-Dale					
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)							
(i) Federal Share	0	0					
(ii) Non-Federal Share	0	0					
(b) Other Federal Operating	222.42	222.42					
Expenditures(c) Total Operating Expenditures	332.43	332.43					
(add 21(a)(i), (a)(ii), and (b))▶	332.43	332.43					
2. Transfers to Affiliated/Other Party							
Committees	0	0					
Contributions to     Federal Candidates/Committees							
and Other Political Committees	1000.00	1000.00					
1. Independent Expenditures	0	0					
(use Schedule E)5. Coordinated Party Expenditures							
(2 U.S.C. §441a(d)) (use Schedule F)	0	0					
(223 25.100010 1 )							
S. Loan Repayments Made	0	0					
7. Loans Made	0	0					
(a) Individuals/Persons Other							
Than Political Committees	0	0					
(b) Political Party Committees	0	0					
(b) Political Party Committees							
(such as PACs)	0	0					
(d) Total Contribution Refunds	0						
(add Lines 28(a), (b), and (c))▶		0					
Other Dishursements	0	0					
O. Other Disbursements	0						
D. Federal Election Activity (2 U.S.C. §431(20))							
(a) Allocated Federal Election Activity							
(from Schedule H6)							
(i) Federal Share	0	0					
(I) III I I I	0	0					
(ii) "Levin" Share	0						
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0					
(c) Total Federal Election Activity (add							
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0					
. Total Disbursements (add Lines 21(c), 22,							
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1332.43	1332.43					
. Total Federal Disbursements							
(subtract Line 21(a)(ii) and Line 30(a)(ii)							
from Line 31)	1332.43	1332.43					

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures						
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1815.00	1815.00				
34. Total Contribution Refunds (from Line 28(d))	0	0				
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1815.00	1815.00				
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	332.43	332.43				
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0				
38. Net Operating Expenditures (subtract Line 37 from Line 36)	332.43	332.43				

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

١	_	LINE	_		:	PAGE	6	OF	10
١	(che	ck only	or	ne)					
	X	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.

or for commercial purposes, effect than doll	g the hame and address of any political committee t	S concil contributions from outin confillation.
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA I	NC POLITICAL ACTION COMMITT	EE
Full Name (Last, First, Middle Initial)  Ronald L Alexander  Mailing Address 1604 Bingham Dr		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Knoxville	State Zip Code TN 37922-8066	Transaction ID : 327-P3680  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	62.49
Name of Employer Willis of Tennessee, Inc. Receipt For:	Occupation  Managing Partner	- Payroll Deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  249.96	(\$20.83 Semi-Monthly)
Full Name (Last, First, Middle Initial)  3. Deneen M Huber  Mailing Address 3607 Northridge Dr	·	Date of Receipt
City Allison Park	State Zip Code PA 15101-5003	Transaction ID : 327-P3682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	333.36
Name of Employer Willis Americas Administration, Inc.	Occupation Senior Resource Consultant	Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.04	(\$41.67 Semi-Monthly)
Full Name (Last, First, Middle Initial)  Todd J. Jones		Date of Receipt
Mailing Address 637 Goose Neck Dr		06 30 2013
City Lititz	State Zip Code PA 17543-8368	Transaction ID : 327-P3683  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.49
Name of Employer Willis North America, Inc.	Occupation President WNA	Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  249.96	(\$20.83 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional	al)	458.34
TOTAL This Period (last page this line num	nber only)	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

_			INE NUMBER: PAGE 7 OF 10								
(ch	nec	ck only	or	ne)							
>	X	11a		11b		11c		12	!		
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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.

or for commercial purposes, other than using th	e name and address of any political committee to	5 SOUGH COMMIDUMONS FROM SUCH COMMINUTE.
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC	POLITICAL ACTION COMMITTE	E
Full Name (Last, First, Middle Initial)  Jay M. Kirschbaum  Mailing Address 1520 Woodroyal East Dr		Date of Receipt
City Chesterfield	State Zip Code MO 63017-5550	06 30 2013 Transaction ID : 327-P3684
FEC ID number of contributing federal political committee.  Name of Employer  Willis Americas Administration, Inc.  Receipt For:  Primary General Other (specify)	Occupation Consulting Director  Aggregate Year-to-Date   500.04	Amount of Each Receipt this Period  333.36  Payroll Deduction  (\$41.67 Semi-Monthly)
Full Name (Last, First, Middle Initial)  Mailing Address		Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code  C Occupation	Amount of Each Receipt this Period
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		333.36
TOTAL This Period (last page this line number	only)	791.70

### S ľ

S	CHEDULE B (FEC Form 3X)	11.		FO	R L	INE	FOR LINE NUMBER: PAGE 8 OF 10										
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$  \rangle$	NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PC	N ITICA	LACTION	~~\\	<i>.</i> / I -	гтс	:=										
//	WILLIS NORTH AWERICA INC PC	LITICA	LACTION	COIVII	VII	116	E										
_	Full Name (Last, First, Middle Initial)						Data	. ( D:	-1		1						
Α.	SunTrust Bank of Nashville		Date of Disbursement														
	Mailing Address P.O. Box 305110				01 22 2013												
	•	State	Zip Code	Tran	sact	ion ID		ns ns									
	Nashville Purpose of Disbursement	TN	37230				ITali	Saci	ion ib	, . J	00						
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В.	Full Name (Last, First, Middle Initial)						Doto	of Di	ماريده		nt.						
Ь.	SunTrust Bank of Nashville						Date of		SDUISE			V	/ = Y	ı V	-		
	Mailing Address P.O. Box 305110						02			22			2013				
	City S Nashville			Transaction ID: 309													
	Purpose of Disbursement	TN	37230	_	-	_											
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	Senate	Primary	General														
		Other (spec	cify) 🔻														
_	State: District:																
C.	Full Name (Last, First, Middle Initial)  SunTrust Bank of Nashville						Date of	of Di	sburse	eme	nt						
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	Mailing Address P.O. Box 305110						03	_	2	20	L	_ 2	013	_	_		
	City	State	Zip Code				<b>T</b>		15								
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SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 9 OF										10						
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or	for commercial purposes, other than using the name	e and address	of any politica	al con	nmit	ttee to	0 S	olicit co	ontrik	outions	s fro	om suc	h co	ommi	tee.					
$  \setminus $	NAME OF COMMITTEE (In Full)	N ITION		<u> </u>				_												
I/	WILLIS NORTH AMERICA INC PO	DLITICAL A	ACTION C	OIVI	IVII		EE	=												
<u></u>	Full Name (Last, First, Middle Initial)																			
A.	SunTrust Bank of Nashville							Date of	of Di	sburse	eme	ent								
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 10 OF 10			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBEN.			
TIENNELD DIODONOLIVILITIO	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26			
		27	28a 28b 28c 29 30l			
Any information copied from such Reports and Stater						
or for commercial purposes, other than using the name	ne and address of any politica	al committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)			_			
angle WILLIS NORTH AMERICA INC PC	DLITICAL ACTION C	OMMITTE	E			
Full Name (Last, First, Middle Initial)		İ				
A. ROYCE CAMPAIGN COMMITTEE			Date of Disbursement			
TO FOE OF WILL FROM THE COMMITTEE	TOTCE CAMILATON COMMITTEE					
Mailing Address PO BOX 2525		04 17 2013				
-						
City S ORANGE	State Zip Code CA 92859		Transaction ID: 314			
Purpose of Disbursement	92059					
Political Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
EDWARD R ROYCE		Type	1000.00			
	nent For: 2014					
	Primary General					
State: CA District: 39	Other (specify) ▼					
State: CA District: 39  Full Name (Last, First, Middle Initial)						
3.			Date of Disbursement			
			M M / D D / Y Y Y			
Mailing Address						
City						
Purpose of Disbursement						
. 4.,5000 0. 2.004.00			Amount of Each Disbursement this Period			
Candidate Name		Category/				
		Type				
Office Sought: House Disburser						
Senate	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
3.			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
			Amount of Each Disbursement this Period			
Candidate Name		Category/				
		Туре				
Office Sought: House Disburser						
Senate   President	Other (specify) —					
State: District:	Other (specify) ▼					
State.						
SUBTOTAL of Disbursements This Page (optional)			1000.00			
TOTAL This Period (last page this line number only)			1000.00			