

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 07 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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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>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	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

FEC Form 3X (Rev. 06/2004)

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

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

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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: PAGE 6 / 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)
 Jimmy Armistead
 Mailing Address 2124 Memorial Dr
 City State Zip Code
 Clarksville TN 37043
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9
Transaction ID: SA11AI.6056
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tennessee Valley Crop Ins Agent
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Scott Arnold
 Mailing Address 1507 Alderwood Dr SW
 City State Zip Code
 Altoona IA 50009
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 3 / 2 0 0 9
Transaction ID: SA11AI.6044
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rain & Hail, LLC Marketing Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

C. Full Name (Last, First, Middle Initial)
 Jas Bains
 Mailing Address 4227 Fortna Road
 City State Zip Code
 Yaba City CA 95993
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 2 / 2 0 0 9
Transaction ID: SA11AI.6116
 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

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: (check only one)	PAGE 7 / 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	

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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) Rick Bird		Date of Receipt
	Mailing Address 9 N. Madison		<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 05 / 07 / 2009
	City	State	Zip Code
	Emmetsburg	IA	50536
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6110
Name of Employer Great American		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
		<input type="text"/> 245.00	

B.	Full Name (Last, First, Middle Initial) Diane R Bjerke		Date of Receipt
	Mailing Address 113 17th Ave West		<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 06 / 24 / 2009
	City	State	Zip Code
	West Fargo	ND	58078
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6141
Name of Employer Valley Crop Insurance		Occupation Sales	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"/> 500.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Dale Borrer		Date of Receipt
	Mailing Address 2723 Pomona 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 06 / 03 / 2009
	City	State	Zip Code
	Eau Claire	WI	54701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6065
Name of Employer FCIA		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"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 995.00
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 / 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	

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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) William Brewer		Date of Receipt MM / DD / YYYY 06 / 07 / 2009		
	Mailing Address 622 Beth Drive		Transaction ID: SA11AI.6124		
	City Great Falls	State MT	Zip Code 59405	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Prairie Mountain Ins Inc.	Occupation 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 Zearing	State IA	Zip Code 50278	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self employed	Occupation 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 West Des Moines	State IA	Zip Code 50265-2229	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rain & Hail	Occupation 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: PAGE 9 / 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

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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 K. Burger

Mailing Address 1209 Amanda Ct

City State Zip Code
Eau Claire WI 54703

FEC ID number of contributing federal political committee. C

Name of Employer
North Central Crop Insurance

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 24 / 2009

Transaction ID: SA11AI.6051

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Steve Carthel

Mailing Address 6606 Roxton

City State Zip Code
Amarillo TX 79109

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 ▼
500.00

Date of Receipt
04 / 01 / 2009

Transaction ID: SA11AI.6033

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Douglas A Clark

Mailing Address 298 S. 4th Street

City State Zip Code
Sheldon IL 60966

FEC ID number of contributing federal political committee. C

Name of Employer
Owner

Occupation
Clark Insurance Agency Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
05 / 07 / 2009

Transaction ID: SA11AI.6059

Amount of Each Receipt this Period
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

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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) Dean Clarke		Date of Receipt MM / DD / YYYY 05 / 07 / 2009		
	Mailing Address 5225 Wayne Trace Road		Transaction ID: SA11AI.6114		
	City Hamilton	State OH	Zip Code 45011	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Great American	Occupation 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 Harrison	State MI	Zip Code 48625	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer JC Colville Crop Insurance	Occupation 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 Great Falls	State MT	Zip Code 59404	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rain & Hail, LLC	Occupation 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: (check only one)	PAGE 11 / 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	

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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) Donald F Connealy	Date of Receipt MM / DD / YYYY 04 / 14 / 2009
	Mailing Address 206 Ridgewood Drive	Transaction ID: SA11AI.6045
	City State Zip Code Council Bluffs IA 51503	Amount of Each Receipt this Period 245.00
	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 ▼ 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 State Zip Code Wayzata MN 55391	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Producers Ag Insurance 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 State Zip Code Union KY 41091	Amount of Each Receipt this Period 495.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Great American Ins Co 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)

<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) Brad Darling		Date of Receipt MM / DD / YYYY 04 / 29 / 2009
Mailing Address 5005 Forest Hill Dr		Transaction ID: SA11AI.6109
City Monroe	State GA	Zip Code 30655
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 245.00
Name of Employer Rain & Hail	Occupation Claims/QC Mgr	
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) James Deal		Date of Receipt MM / DD / YYYY 04 / 24 / 2009
Mailing Address 16191 Makah St NW		Transaction ID: SA11AI.6107
City Anoka	State MN	Zip Code 55303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NAU Country Insurance	Occupation Business owner	
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) Dan Delano		Date of Receipt MM / DD / YYYY 04 / 13 / 2009
Mailing Address 18608 Lamont Street		Transaction ID: SA11AI.6043
City Omaha	State NE	Zip Code 68130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rain & Hail, LLC	Occupation Asst. VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)	
<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

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

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

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

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
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 14 / 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	

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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) J.R. Estes	Date of Receipt MM / DD / YYYY 04 / 09 / 2009
	Mailing Address 48 Willow Drive	Transaction ID: SA11AI.6088
	City State Zip Code Winchesta KY 40391	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Producers Ag Compliance Supv	
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) Richard S. Fagley	Date of Receipt MM / DD / YYYY 04 / 09 / 2009
	Mailing Address 1585 Searight Drive	Transaction ID: SA11AI.6040
	City State Zip Code Pleasant Hill IA 50327	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail 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) Chris Fisher	Date of Receipt MM / DD / YYYY 06 / 16 / 2009
	Mailing Address 4305 159th Street	Transaction ID: SA11AI.6074
	City State Zip Code Urbandale IA 50323	Amount of Each Receipt this Period 500.00
	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 ▼ 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: PAGE 15 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
 Steven Fleece
 Mailing Address 7748 Quail Creek Trace
 City State Zip Code
 Pittsboro IN 46167
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 9
Transaction ID: SA11AI.6140
 Amount of Each Receipt this Period
 245.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fleece Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

B. Full Name (Last, First, Middle Initial)
 Gary Flynn
 Mailing Address 1785 W Eddy Rd
 City State Zip Code
 Sandusky MI 48471
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 5 / 2 0 0 9
Transaction ID: SA11AI.6137
 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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

C. Full Name (Last, First, Middle Initial)
 Ronald Gerstenberger
 Mailing Address 229 W Forester Road
 City State Zip Code
 Sandusky MI 48471
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 5 / 2 0 0 9
Transaction ID: SA11AI.6135
 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
 Receipt For: Primary General Other (specify) ▼
 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: PAGE 16 / 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
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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)
Kim R. Gibson

Mailing Address 21765 Greenview Road

City State Zip Code
Council Bluffs IA 51503

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

Name of Employer Occupation
Agro National Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 995.00

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

Transaction ID: SA11AI.6052

Amount of Each Receipt this Period
995.00

B.

Full Name (Last, First, Middle Initial)
Rick Gibson

Mailing Address 535 West Broadway

City State Zip Code
Council Bluffs IA 51503

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

Name of Employer Occupation
Agro National, LLC Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11AI.6068

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Charles L. Goode

Mailing Address 704 Davidson Street

City State Zip Code
Raleigh NC 27609

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

Name of Employer Occupation
Rain & Hail, LLC Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.6035

Amount of Each Receipt this Period
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: (check only one)	PAGE 17 / 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	

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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) Gary Gray		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
	Mailing Address 7509 N City Rd 200 E		Transaction ID: SA11AI.6145
	City	State	Zip Code
	Frankfort	IN	46041
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Crop Insurance Specialists		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) Lee R. Gutknecht		Date of Receipt MM / DD / YYYY 04 / 24 / 2009
	Mailing Address Box 156		Transaction ID: SA11AI.6050
	City	State	Zip Code
	Howard Lake	MN	55349
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer North Central Crop Ins.		Occupation State Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Delaine Hanson		Date of Receipt MM / DD / YYYY 06 / 16 / 2009
	Mailing Address 1191 O Avenue		Transaction ID: SA11AI.6139
	City	State	Zip Code
	Villisca	IA	50864
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self employed		Occupation Ag sales	
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)	▶	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: (check only one)	PAGE 18 / 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	

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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) Larry Heitman		Date of Receipt MM / DD / YYYY 04 / 24 / 2009		
	Mailing Address PO Box 8628		Transaction ID: SA11AI.6049		
	City Woodland	State CA	Zip Code 95695	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer California Crop Ins Svcs	Occupation Executive VP			
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) Dennis Keifer		Date of Receipt MM / DD / YYYY 04 / 24 / 2009		
	Mailing Address 1866 Cleveland Avenue		Transaction ID: SA11AI.6089		
	City Charles City	State IA	Zip Code 50616	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NAU Country Insurance	Occupation VP Branch Mgr			
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) Steve Keiser		Date of Receipt MM / DD / YYYY 04 / 02 / 2009		
	Mailing Address 88653 Highway 81		Transaction ID: SA11AI.6080		
	City Fordyce	State NE	Zip Code 68736	Amount of Each Receipt this Period 995.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer self-employed	Occupation insurance agent			
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)	▶	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 19 / 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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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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)
Michael Kelley

Mailing Address 3910 Brockton Drive

City State Zip Code
Cincinnati OH 45251

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 ▼
395.00

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

Transaction ID: SA11AI.6060

Amount of Each Receipt this Period
395.00

B.

Full Name (Last, First, Middle Initial)
Jerry D. Kincade

Mailing Address PO Box 254

City State Zip Code
Winterset IA 50273

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

Name of Employer Rain & Hail, LLC Occupation VP & Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

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

Transaction ID: SA11AI.6036

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Roger Kleweno

Mailing Address PO Box 37

City State Zip Code
Burlington CO 80807

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

Name of Employer Colorado Federal Agency, Inc. Occupation Insurance Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11AI.6138

Amount of Each Receipt this Period
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: (check only one)	PAGE 20 / 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

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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) Elliott L. Konschak		Date of Receipt
	Mailing Address 752 142nd Lane NW		<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 0 4 / 2 4 / 2 0 0 9
	City	State	Zip Code
	Andover	MN	55304
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6047
Name of Employer NAU Country Insurance		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 ▼ 1000.00	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) James Korin		Date of Receipt
	Mailing Address 7938 Maple Hill Rd		<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 0 4 / 2 4 / 2 0 0 9
	City	State	Zip Code
	Corcoran	MN	55340
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6102
Name of Employer NAU Country Insurance		Occupation CFO	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 ▼ 1000.00	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Brian J. Laird		Date of Receipt
	Mailing Address 501 W. Enterprise Ave.		<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 0 4 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Clovis	CA	93611
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6053
Name of Employer Rain & Hail 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 ▼ 395.00	<input type="text"/> 395.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2395.00
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: PAGE 21 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
 Jess Ben Latham
 Mailing Address Box 229
 City Amarillo State TX Zip Code 79105
 Date of Receipt 06 / 07 / 2009
Transaction ID: SA11AI.6067
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Producers Lloyds Ins Co Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

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

C. Full Name (Last, First, Middle Initial)
 Michael H Lewis
 Mailing Address 24903 Woods Drive
 City Denton State MD Zip Code 21629
 Date of Receipt 06 / 10 / 2009
Transaction ID: SA11AI.6072
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance, Inc. Occupation Agency Producer
 Receipt For: Primary General 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)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Robert J Lindsay

Mailing Address 213 North Hooker

City State Zip Code
Nora Springs IA 50458

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

Name of Employer Occupation
NAU Country Insurance 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.6148

Amount of Each Receipt this Period
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

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

Name of Employer Occupation
Rain & Hail, LLC Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

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

Transaction ID: SA11AI.6054

Amount of Each Receipt this Period
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

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

Name of Employer Occupation
NAU Country Insurance Claims Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.6099

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 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
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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)
Linda M. Miller

Mailing Address 458 Lake Road NE

City Lancaster State OH Zip Code 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: 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 Urbandale State IA Zip Code 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: 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 Altus State OK Zip Code 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: 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: (check only one)	PAGE 24 / 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

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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 O Mossman		Date of Receipt	
	Mailing Address 11295 240th Avenue		M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.6090
	Zimmerman	MN	55398	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer NAU Country Insurance		Occupation VP Claims		
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) Mark O Mossman		Date of Receipt	
	Mailing Address 11295 240th Avenue		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.6108
	Zimmerman	MN	55398	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer NAU Country Insurance		Occupation VP Claims		
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) Danny D Mostad		Date of Receipt	
	Mailing Address 9315 Manilla Rd		M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.6147
	Langdon	ND	58249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Mostad Ins Services		Occupation Agent		
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)	▶	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	

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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) 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)	
<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

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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) Terry L. Peniston		Date of Receipt																					
	Mailing Address 1024 Watermill 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>5</td><td></td><td>0</td><td>8</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	5		0	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	8		2	0	0	9														
	City Lexington State KY Zip Code 40515		Transaction ID: SA11AI.6062																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer FCIA Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		1000.00																						

B.	Full Name (Last, First, Middle Initial) Jim Percy		Date of Receipt																					
	Mailing Address 1340 York Drive		<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>3</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	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		0	3		2	0	0	9														
	City Blackfoot State ID Zip Code 83221		Transaction ID: SA11AI.6038																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Conquest Insurance Agency Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 995.00		995.00																						

C.	Full Name (Last, First, Middle Initial) Colleen Peterson		Date of Receipt																					
	Mailing Address 3630 Suchla Ct		<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>2</td><td>4</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		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		2	4		2	0	0	9														
	City Eau Claire State WI Zip Code 54701		Transaction ID: SA11AI.6101																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer NAU Country Insurance Occupation MPCI Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		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: (check only one)	PAGE 27 / 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

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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) Kevin Powers		Date of Receipt MM / DD / YYYY 04 / 01 / 2009		
	Mailing Address 1853 County Road 11		Transaction ID: SA11AI.6037		
	City Panhandle	State TX	Zip Code 79068	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼
250.00

B.	Full Name (Last, First, Middle Initial) Jo Rogers		Date of Receipt MM / DD / YYYY 06 / 12 / 2009		
	Mailing Address 4731 Highway 54		Transaction ID: SA11AI.6134		
	City Pine Bluff	State AR	Zip Code 71603	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Delta Farm Service	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) Steve Schou		Date of Receipt MM / DD / YYYY 04 / 24 / 2009		
	Mailing Address 1919 W 39th Street		Transaction ID: SA11AI.6098		
	City Kearney	State NE	Zip Code 68845	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	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)	▶	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)
 11a 11b 11c 12
 13 14 15 16 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)
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

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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)
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 MM / DD / YYYY
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 MM / DD / YYYY
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 MM / DD / YYYY
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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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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)
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)
 11a 11b 11c 12
 13 14 15 16 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)
Ross Wehling

Mailing Address 7230 Alhambra Road

City Alhambra State IL Zip Code 62001

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

Name of Employer Heartland Crop Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 18 / 2009

Transaction ID: SA11AI.6064

Amount of Each Receipt this Period 245.00

B. Full Name (Last, First, Middle Initial)
Joel F. Weiss

Mailing Address 6319 SW 23rd St

City Topeka State KS Zip Code 66614

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

Name of Employer Blakely Crop Hail, Inc. Occupation VP, Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt 05 / 12 / 2009

Transaction ID: SA11AI.6063

Amount of Each Receipt this Period 495.00

SUBTOTAL of Receipts This Page (optional) ► 740.00

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) 13TH COLONY LEADERSHIP COMMITTEE, INC.</p> <p>Mailing Address P. O. Box 114</p> <p>City Savannah State GA Zip Code 31402</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input 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: District:</p>	<p>Transaction ID: SB23.6017 Date of Disbursement 06 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN</p> <p>Mailing Address PO BOX 3197</p> <p>City LITTLE ROCK State AR Zip Code 72203</p> <p>Purpose of Disbursement</p> <p>Candidate Name BLANCHE LAMBERT LINCOLN</p> <p>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</p>	<p>Transaction ID: SB23.6007 Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN</p> <p>Mailing Address PO BOX 3197</p> <p>City LITTLE ROCK State AR Zip Code 72203</p> <p>Purpose of Disbursement</p> <p>Candidate Name BLANCHE LAMBERT LINCOLN</p> <p>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: AR District: 01</p>	<p>Transaction ID: SB23.6008 Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p>

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

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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)
FRIENDS OF CONGRESSMAN TIM HOLDEN

Mailing Address 18 N. SECOND ST., BOX 37
PO BOX 37

City SAINT CLAIR State PA Zip Code 17970

Purpose of Disbursement

Candidate Name
TIM HOLDEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 17

Transaction ID: SB23.6011

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO

Mailing Address 12 TRUMBULL STREET

City NEW HAVEN State CT Zip Code 06511

Purpose of Disbursement

Candidate Name
ROSA DELAURO

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.6006

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
JIM COSTA FOR CONGRESS

Mailing Address 2037 W Bullard Avenue
355

City Fresno State CA Zip Code 93711

Purpose of Disbursement

Candidate Name
JIM MR. COSTA

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 20

Transaction ID: SB23.6028

Date of Disbursement

06 / 25 / 2009

Amount of Each Disbursement this Period

1000.00

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

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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)
MIKE MCINTYRE FOR CONGRESS

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement

Candidate Name
MIKE MCINTYRE

Office Sought: House
 Senate
 President

State: NC District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6013

Date of Disbursement

05 / 20 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MORAN FOR CONGRESS

Mailing Address 311 North Washington Street
Suite 200L

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name
JAMES P JR MORAN

Office Sought: House
 Senate
 President

State: VA District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6004

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

4500.00

C. Full Name (Last, First, Middle Initial)
MORAN FOR CONGRESS

Mailing Address 311 North Washington Street
Suite 200L

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name
JAMES P JR MORAN

Office Sought: House
 Senate
 President

State: VA District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6005

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

500.00

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

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

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)

<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)
PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Road

City State Zip Code
Detroit Lakes MN 56501

Purpose of Disbursement

Candidate Name
COLLIN CLARK PETERSON

Office Sought: House
 Senate
 President

State: MN District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6151

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

3500.00

B.

Full Name (Last, First, Middle Initial)
STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA

Mailing Address PO Box 2009

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement

Candidate Name
STEPHANIE HERSETH

Office Sought: House
 Senate
 President

State: SD District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6021

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
TEAM EMERSON FOR JO ANN EMERSON

Mailing Address P.O. Box 822
P.O. Box 822

City State Zip Code
Cape Girardeau MO 63702

Purpose of Disbursement

Candidate Name
JO ANN H EMERSON

Office Sought: House
 Senate
 President

State: MO District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6012

Date of Disbursement

05 / 14 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

34000.00