

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Property Casualty Insurers Association of America Political Action Committee (PCIPAC)

ADDRESS (number and street) 8700 West Bryn Mawr  
Suite 1200S  
Chicago IL 60631-3512  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00066472 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 11 / 29 / 2016 through [MM] / [DD] / [YYYY] 12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Holmes, June, T., ,  
Type or Print Name of Treasurer

Signature of Treasurer Holmes, June, T., , [Electronically Filed] Date [MM] / [DD] / [YYYY] 01 / 18 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		92256.89
(b) Cash on Hand at Beginning of Reporting Period.....	117877.36	
(c) Total Receipts (from Line 19) .....	40425.57	598354.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	158302.93	690610.93
7. Total Disbursements (from Line 31).....	3879.65	536187.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	154423.28	154423.28
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33637.28	441345.75
(ii) Unitemized .....	3853.12	68153.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	37490.40	509498.89
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	69500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	38490.40	578998.89
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).....	1935.17	10855.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	8500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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 Transfers (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)).....▶	40425.57	598354.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	40425.57	598354.04

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	779.65	10955.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	779.65	10955.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	443237.50
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	100.00	145.00
(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)).....	100.00	145.00
29. Other Disbursements (Including Non-Federal Donations).....	500.00	81850.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	3879.65	536187.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3879.65	536187.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	38490.40	578998.89
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	145.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38390.40	578853.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	779.65	10955.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1935.17	10855.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-1155.52	100.00

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

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

FOR LINE NUMBER: PAGE 6 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Adaway, Kerry, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) IT Effectiveness Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-1**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Albers, Ryan, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Ag Governance Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-2**  
 Amount of Each Receipt this Period 20.83  
 Memo Item

**C. Altieri, Frank, X, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President PMAMC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.83  
**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 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Altieri, Frank, X, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President PMAMC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121213133-1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Altieri, Frank, X, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President PMAMC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Balashaitis, Ann, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Vice President, Strategy and Planning  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-3**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<b>TOTAL</b> 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 8 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Baldwin, Kristina, , ,**

Mailing Address 136 Washington Ave  
Ste 1

City Albany	State NY	Zip Code 12210-2203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCI	Occupation (for Individual) Vice President, State Government Rela
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1380.00

Date of Receipt  
**11 / 29 / 2016**  
**Transaction ID : 2016112914135-1**

Amount of Each Receipt this Period  
57.50

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Baldwin, Kristina, , ,**

Mailing Address 136 Washington Ave  
Ste 1

City Albany	State NY	Zip Code 12210-2203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCI	Occupation (for Individual) Vice President, State Government Rela
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1380.00

Date of Receipt  
**12 / 14 / 2016**  
**Transaction ID : 2016121415133-1**

Amount of Each Receipt this Period  
57.50

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Baldwin, Kristina, , ,**

Mailing Address 136 Washington Ave  
Ste 1

City Albany	State NY	Zip Code 12210-2203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCI	Occupation (for Individual) Vice President, State Government Relat
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1380.00

Date of Receipt  
**12 / 29 / 2016**  
**Transaction ID : 2016122912138-1**

Amount of Each Receipt this Period  
57.50

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	172.50
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Bateman, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Workers Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-2**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Bateman, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Workers Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-2**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Bateman, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Workers Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-3**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 OF 142
	<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Berger, Eric, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1625 W Causeway Approach  
 City Mandeville State LA Zip Code 70471-2954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gray Insurance Group Occupation (for Individual) Senior Vice President - Government Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 30 / 2016  
**Transaction ID : DF8B4A8F3647419BB7EB**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Bergstrom, Stanley, A, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-4**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Blume, Holce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI PAC Contributors Occupation (for Individual) Spouse of Paul Blume, PCI  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 1ADFF53DCA0D49FDBDA1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Bogart, Jason, R, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 717 Mulberry St  
City Des Moines State IA Zip Code 50309-3810  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) EMC Insurance Companies Occupation (for Individual) Manager Casualty Underwriting  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 628D778690A04FC6B741**  
Amount of Each Receipt this Period 1200.00  
 Memo Item

**B. Briggs, Bill, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 444 N Capitol St NW Ste 801  
City Washington State DC Zip Code 20001-1508  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement - State  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-3**  
Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Briggs, Bill, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 444 N Capitol St NW Ste 801  
City Washington State DC Zip Code 20001-1508  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement - State  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 950.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : EF82B42B20934A07A371**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1275.00  
**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 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Briggs, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement - State  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-3**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Briggs, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement - State  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-4**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Broadie, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Financial Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**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 13 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Broadie, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Financial Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-4**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Broadie, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Financial Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-5**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Buckley, Robert, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President Research and Chief Stra  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2016  
**Transaction ID : 7BAF3342FDD24A2DADBC**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Burton, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Statistical Reporting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Burton, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Statistical Reporting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Burton, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Statistical Reporting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Campbell, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 N Grant St  
 Ste A102  
 City Denver State CO Zip Code 80203-1844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-6**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Campbell, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 N Grant St  
 Ste A102  
 City Denver State CO Zip Code 80203-1844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-6**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Campbell, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 N Grant St  
 Ste A102  
 City Denver State CO Zip Code 80203-1844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Relat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-7**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Carey, Kate, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Federal Government Re  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2562.50

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-7**  
 Amount of Each Receipt this Period 112.50  
 Memo Item

**B. Carey, Kate, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Federal Government R  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2562.50

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-7**  
 Amount of Each Receipt this Period 112.50  
 Memo Item

**C. Carey, Kate, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Federal Government Re  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2562.50

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-8**  
 Amount of Each Receipt this Period 112.50  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 337.50  
**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 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Clary, Kevin, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-29**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Clary, Kevin, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-1**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Clary, Kevin, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-1**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Clary, Kevin, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-29**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Clary, Kevin, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-57**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Clausen, Brett, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 325 S Higley Rd  
 Ste 200  
 City Gilbert State AZ Zip Code 85296-4770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Business Unit Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-5**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Cochrane, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President and Chief Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Cochrane, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President and Chief Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121213133-2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Cochrane, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President and Chief Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 20 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Conron-May, Anne Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-2**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Conron-May, Anne Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-30**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Conron-May, Anne Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5426 Bay Center Dr  
 Ste 200  
 City Tampa State FL Zip Code 33609-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-58**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 21 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Conron-May, Anne Marie, , ,**

Mailing Address 5426 Bay Center Dr  
 Ste 200

City Tampa State FL Zip Code 33609-3435

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

Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-30**

Amount of Each Receipt this Period 20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Conron-May, Anne Marie, , ,**

Mailing Address 5426 Bay Center Dr  
 Ste 200

City Tampa State FL Zip Code 33609-3435

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

Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-2**

Amount of Each Receipt this Period 20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Crain, Wade, O, ,**

Mailing Address 2627 Kfb Plz

City Manhattan State KS Zip Code 66503-8116

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

Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Business Center Director

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-6**

Amount of Each Receipt this Period 20.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Cristea, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-31**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Cristea, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Cristea, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-31**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**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 23 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Cristea, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-3**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Cristea, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-59**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Davey, Mark, O, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4905 Belfort Rd Ste 110  
 City Jacksonville State FL Zip Code 32256-6007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stillwater Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2826848C23EF4166A981**  
 Amount of Each Receipt this Period  
 1200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> 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 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Debellis, Ann, P, , Esq.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 Sullivan Way  
 City Ewing State NJ Zip Code 08628-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NJM Insurance Group Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 150F49251FE5CC1954F**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Decker, Casey, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Chief Information Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-7**  
 Amount of Each Receipt this Period 60.00  
 Memo Item

**C. Demello-Johnson, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-33**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> 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 25 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Demello-Johnson, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-5**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Demello-Johnson, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-5**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Demello-Johnson, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-33**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Demello-Johnson, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-61**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Dennis, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 E 96th St  
 City Indianapolis State IN Zip Code 46240-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-34**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Dennis, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 E 96th St  
 City Indianapolis State IN Zip Code 46240-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 27 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Dennis, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 E 96th St  
 City Indianapolis    State IN    Zip Code 46240-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Assistant Vice President Claims  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-62**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Dennis, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 E 96th St  
 City Indianapolis    State IN    Zip Code 46240-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Assistant Vice President Claims  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-34**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Dennis, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 E 96th St  
 City Indianapolis    State IN    Zip Code 46240-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Assistant Vice President Claims  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 28 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Diefenthaler, Aaron, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9025 N Lindbergh Dr  
 City Peoria State IL Zip Code 61615-1499  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RLI Occupation (for Individual) Vice President, Chief Investment Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : 6E7127A240F94E55B254**  
 Amount of Each Receipt this Period 240.00  
 Memo Item

**B. Dieterle, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Field Marketing & Unde  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-32**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Dieterle, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Field Marketing & Unde  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-4**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	310.00
<b>TOTAL</b> 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 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Dieterle, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Field Marketing & Unde  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-60**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Dieterle, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Field Marketing & Unde  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-4**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Dieterle, Michael, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Field Marketing & Unde  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-32**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**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 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Donnelly, Vincent, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Donnelly, Vincent, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121213133-3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Donnelly, Vincent, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Espinoza, Gerardo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-7**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Espinoza, Gerardo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-35**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Espinoza, Gerardo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-35**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**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 32 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Espinoza, Gerardo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-63**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Espinoza, Gerardo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-7**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Estvanic, Sally, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Park Cir  
 City Westfield Center State OH Zip Code 44251-9700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Westfield Group Occupation (for Individual) Group Government Relations Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : D717051D7E85404FA7C3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> 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 33 OF 142 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Feliciano, Armand, , ,</b>			Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>11</td><td></td><td>29</td><td></td><td>2016</td> </tr> </table> <b>Transaction ID : 2016112914135-13</b>			M M	/	D D	/	Y Y Y Y	11		29		2016
M M	/	D D	/	Y Y Y Y											
11		29		2016											
Mailing Address 1415 L St Ste 670			Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>28.75</td> </tr> </table> <input type="checkbox"/> Memo Item			28.75									
28.75															
City Sacramento	State CA	Zip Code 95814-3964													
FEC ID number of contributing federal political committee. C															
Name of Employer (for Individual) PCI		Occupation (for Individual) Vice President, ACIC													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td>850.00</td> </tr> </table>	850.00												
850.00															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Feliciano, Armand, , ,</b>			Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>12</td><td></td><td>14</td><td></td><td>2016</td> </tr> </table> <b>Transaction ID : 2016121415133-13</b>			M M	/	D D	/	Y Y Y Y	12		14		2016
M M	/	D D	/	Y Y Y Y											
12		14		2016											
Mailing Address 1415 L St Ste 670			Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>28.75</td> </tr> </table> <input type="checkbox"/> Memo Item			28.75									
28.75															
City Sacramento	State CA	Zip Code 95814-3964													
FEC ID number of contributing federal political committee. C															
Name of Employer (for Individual) PCI		Occupation (for Individual) Vice President, ACIC													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td>850.00</td> </tr> </table>	850.00												
850.00															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Feliciano, Armand, , ,</b>			Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>12</td><td></td><td>29</td><td></td><td>2016</td> </tr> </table> <b>Transaction ID : 2016122912138-14</b>			M M	/	D D	/	Y Y Y Y	12		29		2016
M M	/	D D	/	Y Y Y Y											
12		29		2016											
Mailing Address 1415 L St Ste 670			Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>28.75</td> </tr> </table> <input type="checkbox"/> Memo Item			28.75									
28.75															
City Sacramento	State CA	Zip Code 95814-3964													
FEC ID number of contributing federal political committee. C															
Name of Employer (for Individual) PCI		Occupation (for Individual) Vice President, ACIC													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td>850.00</td> </tr> </table>	850.00												
850.00															

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1" style="width: 100%; text-align: right;"> <tr> <td>86.25</td> </tr> </table>	86.25
86.25		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1" style="width: 100%; text-align: right;"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 34 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ferro, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-36**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Ferro, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-8**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Ferro, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-8**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 35 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ferro, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-64**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Ferro, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-36**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Finnorn, Joanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President and General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-37**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00  
**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 36 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Finnorn, Joanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Vice President and General Counsel  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-65**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Finnorn, Joanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Vice President and General Counsel  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-9**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Fox, Mark, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Vice President Special Risk  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-38**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 37 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Fox, Mark, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President Special Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-10**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Fox, Mark, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President Special Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-66**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Fox, Mark, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President Special Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-38**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 38 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Fox, Mark, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President Special Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-10**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Gallagher, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Senior Vice President-Eastern Region  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-4**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Gallagher, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Senior Vice President-Eastern Region  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-4**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 39 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Gallagher, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell   State PA   Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group   Occupation (for Individual) Senior Vice President-Eastern Region  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Gallinger, Kurt, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Vice President & Counsel - Governmer  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-39**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Gallinger, Kurt, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Vice President & Counsel - Government  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-11**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 40 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Gallinger, Kurt, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Counsel - Governmen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-11**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Gallinger, Kurt, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Counsel - Governmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-39**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Gallinger, Kurt, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Counsel - Government  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-67**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

30.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 142
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Geadelmann, Lori, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Vice President - Assistant General Cou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-8**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Gerik, Michael, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7420 Fish Pond Rd  
 City Waco State TX Zip Code 76710-1010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Texas Farm Bureau Insurance Companies Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 8600F2750850412B9BDE**  
 Amount of Each Receipt this Period  
 925.00  
 Memo Item

**C. Gillespie, Trey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Workers Compensation  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-14**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<b>TOTAL</b> 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 42 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Gillespie, Trey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Workers Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-14**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Gillespie, Trey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Workers Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-15**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Gleason, Mathew, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-9**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 43 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Gordon, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Policy Developm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-16**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Gordon, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Policy Developm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-16**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Gordon, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Policy Developm  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-17**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 44 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Gourley, Samuel, James, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Director, Business Transformation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : E6A044FA9E57429EAC57**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Graf, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Investment Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-12**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Graf, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Investment Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-40**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> 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 45 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Graf, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Investment Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-12**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Graf, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Investment Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-68**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Graf, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Investment Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-40**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 46 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Graham, Kelly, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Assistant Vice President - Premium Auc  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-41**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**B. Graham, Kelly, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Assistant Vice President - Premium Au  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-13**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**C. Graham, Kelly, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Assistant Vice President - Premium Aud  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-41**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.00  
**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 47 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Graham, Kelly, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President - Premium Auc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-69**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**B. Graham, Kelly, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President - Premium Au  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-13**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**C. Griffin, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Personal Lines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-17**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 57.00  
**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 48 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Griffin, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Personal Lines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-17**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Griffin, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Personal Lines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-18**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Guzski, Steven, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Senior Vice President, Director of Hum  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2016  
**Transaction ID : 2115E95EF28A4BFA9AC6**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> 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 49 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hageli, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Personal Lines Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 274.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-19**  
 Amount of Each Receipt this Period  
 11.43  
 Memo Item

**B. Hageli, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Personal Lines Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 274.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-19**  
 Amount of Each Receipt this Period  
 11.43  
 Memo Item

**C. Hageli, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Personal Lines Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 274.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-20**  
 Amount of Each Receipt this Period  
 11.43  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	34.29
<b>TOTAL</b> 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 50 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hancock, Edward, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President - Chief Underwriting Of  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : 7975B9AB9D74484592A1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Hanna, Jessica, Hanson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-21**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Hanna, Jessica, Hanson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-21**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> 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 51 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hanna, Jessica, Hanson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-22**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Harvey, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Harvey, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121213133-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**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 52 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Harvey, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hawken, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 S Monroe St Ste 300  
 City Tallahassee State FL Zip Code 32301-1561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FCCI Insurance Group Occupation (for Individual) Director Legislative Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 9A6D5A4A89E0543A75B**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Hill, Dan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9201 Bunsen Pkwy  
 City Louisville State KY Zip Code 40220-3792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kentucky Farm Bureau Insurance Compani Occupation (for Individual) Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 28 / 2016  
**Transaction ID : D9282EB399CA4F559C35**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	535.00
<b>TOTAL</b> 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 53 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hobson, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-14**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hobson, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-42**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Hobson, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-14**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 54 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hobson, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-70**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hobson, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President, Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-42**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Holcomb, Zeld, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Board Member  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 6960A927A5D74E50967B**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	620.00
<b>TOTAL</b> 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 55 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Holmes, June, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Chief Operating Officer and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.97

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-22**  
 Amount of Each Receipt this Period  
 127.27  
 Memo Item

**B. Holmes, June, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Chief Operating Officer and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.97

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-22**  
 Amount of Each Receipt this Period  
 127.27  
 Memo Item

**C. Holmes, June, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Chief Operating Officer and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.97

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-23**  
 Amount of Each Receipt this Period  
 127.27  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 381.81  
**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 56 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hopper, Derek, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell    State PA    Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group    Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Hopper, Derek, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell    State PA    Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group    Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Hopper, Derek, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell    State PA    Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group    Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122916132-6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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 57 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hostetter, David, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-43**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hostetter, David, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-15**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Hostetter, David, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-15**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 58 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Hostetter, David, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-43**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hostetter, David, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-71**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Isler, Micaela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, State Govern  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-23**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00  
**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 59 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Isler, Micaela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, State Govern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-23**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

**B. Isler, Micaela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, State Govern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-24**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

**C. Jacobson, Robert, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Auto Club Dr  
 City Dearborn State MI Zip Code 48126-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Auto Club Group Occupation (for Individual) Vice President, Chief Underwriting Off  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : AEF6DB229F44433F97CA**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	430.00
<b>TOTAL</b> 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 60 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Jaskolka, Jason, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Associate Claims Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : B77EC19E3126493B8566**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Jones, Robert, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Auto Club Dr  
 City Dearborn State MI Zip Code 48126-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Auto Club Group Occupation (for Individual) Regional Sales Director - ACG  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 483387D82C474493A3C2**  
 Amount of Each Receipt this Period 240.00  
 Memo Item

**C. Joyner, Scott, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Information Technology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-24**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 545.00  
**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 61 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Joyner, Scott, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Information Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-24**  
 Amount of Each Receipt this Period  
 55.00  
 Memo Item

**B. Joyner, Scott, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Information Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-25**  
 Amount of Each Receipt this Period  
 55.00  
 Memo Item

**C. Karlinsky, Fred, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 E Las Olas Blvd  
 Ste 2000  
 City Fort Lauderdale State FL Zip Code 33301-4223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Greenberg Traurig, LLP Occupation (for Individual) Shareholder; Co-Chair, Insurance Regu  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : DAD01307DC22493F9FE7**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1110.00  
**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 62 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Keister, Jane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Business Center Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-10**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Kelley, Edward, J, , Esq.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Liberty Plz FI 18  
 City New York State NY Zip Code 10006-1436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Transatlantic Reinsurance Group Occupation (for Individual) Senior Vice President and Deputy Gen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 8C12D02B796E474C92BC**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Kelley-Hunt, Brooke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, State Public Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-25**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00  
**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 63 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Kelley-Hunt, Brooke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, State Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-25**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Kelley-Hunt, Brooke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, State Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-26**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Kelso, William, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 W Fayette Ave  
 # 417  
 City Springfield State IL Zip Code 62704-2732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Specialty Risk of America Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : EE5CDEFED998440C948D**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1210.00  
**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 64 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Kimmi, Tony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Product Development Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-11**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. King, William, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 04DA0FCED02B4B3191D2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Korte, Kevin, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 Satellite Blvd Ste 200  
 City Duluth State GA Zip Code 30097-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-16**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	528.00
<b>TOTAL</b> 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 65 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Korte, Kevin, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 Satellite Blvd  
 Ste 200  
 City Duluth State GA Zip Code 30097-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-44**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

**B. Korte, Kevin, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 Satellite Blvd  
 Ste 200  
 City Duluth State GA Zip Code 30097-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-16**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

**C. Korte, Kevin, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 Satellite Blvd  
 Ste 200  
 City Duluth State GA Zip Code 30097-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-72**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 24.00  
**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 66 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Korte, Kevin, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 Satellite Blvd  
 Ste 200  
 City Duluth State GA Zip Code 30097-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-44**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

**B. Koslov, Gary, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-7**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Koslov, Gary, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-7**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 28.00  
**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 67 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Koslov, Gary, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Assistant Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-7**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Koster, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Marketing & Distribution Analytics Vic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-12**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Koval, Thomas, A, , Esq.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6300 University Pkwy  
 City Sarasota State FL Zip Code 34240-8424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FCCI Insurance Group Occupation (for Individual) Executive Vice President, Chief Legal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : F7BA805F9B48580B310**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> 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 68 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Kryshak, Cheryl, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President - Risk Control  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2016  
**Transaction ID : 0936A8022D64441290D9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Lambert, Theodore, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Information  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.04

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-28**  
 Amount of Each Receipt this Period 18.46  
 Memo Item

**C. Lambert, Theodore, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Information  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 444.04

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-28**  
 Amount of Each Receipt this Period 18.46  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 286.92  
**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 69 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Lambert, Theodore, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Information  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.04

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-29**  
 Amount of Each Receipt this Period 18.46  
 Memo Item

**B. Lancaster, Ronny, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 13th St NW  
 Ste 1010  
 City Washington State DC Zip Code 20005-3865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Assurant, Inc. Occupation (for Individual) Senior Vice President, Federal Govern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : FFB807D88E9F413293F9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Lebaron, Krista, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Staff Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-27**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 278.46  
**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 70 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Lebaron, Krista, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Staff Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-27**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Lebaron, Krista, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Staff Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-28**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Lemke, Dawn, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Assistant Vice President - Chief Compl  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2016  
**Transaction ID : 28ABFBF9576049F98604**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> 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 71 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Lewsley, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 300  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney, Staff Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-45**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Lewsley, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 300  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney, Staff Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-17**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Lewsley, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 300  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney, Staff Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-17**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 72 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Lewsley, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 300  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney, Staff Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-45**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Lewsley, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 300  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney, Staff Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-73**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Long, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-18**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 73 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Long, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-46**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Long, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-74**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Long, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills   State MI   Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies   Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-46**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 74 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Long, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **12 / 19 / 2016**  
**Transaction ID : 2016121915433-18**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Mahrt-Ganley, Nicole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 L St Ste 670  
 City Sacramento State CA Zip Code 95814-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **11 / 29 / 2016**  
**Transaction ID : 2016112914135-30**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Mahrt-Ganley, Nicole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 L St Ste 670  
 City Sacramento State CA Zip Code 95814-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Public Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **12 / 14 / 2016**  
**Transaction ID : 2016121415133-30**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 75 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Mahrt-Ganley, Nicole, , ,**

Mailing Address 1415 L St  
 Ste 670

City Sacramento State CA Zip Code 95814-3964

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

Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-31**

Amount of Each Receipt this Period 20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Malcolm, Phil, , ,**

Mailing Address 14055 Riveredge Dr  
 Ste 500

City Tampa State FL Zip Code 33637-2091

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

Name of Employer (for Individual) Auto Club South Insurance Company Occupation (for Individual) Vice President Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 4DD68DF019554C2F975F**

Amount of Each Receipt this Period 1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Maloney, Sean, H, ,**

Mailing Address 1 Auto Club Dr

City Dearborn State MI Zip Code 48126-4213

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

Name of Employer (for Individual) Auto Club Group Occupation (for Individual) Senior Vice President and Chief Financ

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 5D952341653A4A4D9932**

Amount of Each Receipt this Period 1200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2220.00

**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 76 OF 142
	<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Manna, Deirdre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Political Engagement &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-31**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Manna, Deirdre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Political Engagement &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : ECB456F8B07248759795**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. Manna, Deirdre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Political Engagement &  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-31**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 77 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Manna, Deirdre, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Political Engagement &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-32**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. McBride, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-47**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. McBride, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-19**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 78 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. McBride, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-19**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. McBride, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-47**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. McBride, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-75**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 79 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. McFaddin, Logan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 S Monroe St  
 Ste 720  
 City Tallahassee State FL Zip Code 32301-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government F  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 802.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-32**  
 Amount of Each Receipt this Period  
 23.00  
 Memo Item

**B. McFaddin, Logan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 S Monroe St  
 Ste 720  
 City Tallahassee State FL Zip Code 32301-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 802.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-32**  
 Amount of Each Receipt this Period  
 23.00  
 Memo Item

**C. McFaddin, Logan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 S Monroe St  
 Ste 720  
 City Tallahassee State FL Zip Code 32301-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government R  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 802.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-33**  
 Amount of Each Receipt this Period  
 23.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.00
<b>TOTAL</b> 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 80 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. McGrath, Melissa, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 Route 9W  
 City Glenmont State NY Zip Code 12077-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farm Family Insurance Companies Occupation (for Individual) Vice President - Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 2016120815132-1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. McGrath, Melissa, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 Route 9W  
 City Glenmont State NY Zip Code 12077-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farm Family Insurance Companies Occupation (for Individual) Vice President - Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : 2016122215132-1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Mead, Ronald, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Personal Lines and Ag Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-14**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 81 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Miller, Susan, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President and General Man  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-33**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Miller, Susan, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President and General Mar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-33**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Miller, Susan, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President and General Man  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-34**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**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 82 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Murphy, Karen, M, , Esq.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14280 Park Meadow Dr  
 Ste 300  
 City Chantilly State VA Zip Code 20151-2291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Medmarc Insurance Group Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 01 / 2016**  
**Transaction ID : 2CD30D6CA4404DF8A6E2**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Nagle, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Statistical  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 29 / 2016**  
**Transaction ID : 2016112914135-34**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Nagle, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Statistical  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 14 / 2016**  
**Transaction ID : 2016121415133-34**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> 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 83 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Nagle, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Statistical  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-35**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Names, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2016  
**Transaction ID : 399550D229FF4DF9976B**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**C. Nelson, Steven, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5225 S 16th St  
 City Lincoln State NE Zip Code 68512-1275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Business Center Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-16**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 84 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Noga, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-17**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Nowak, Rita, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Commercial Lines and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-35**  
 Amount of Each Receipt this Period 9.00  
 Memo Item

**C. Nowak, Rita, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Commercial Lines and V  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-36**  
 Amount of Each Receipt this Period 9.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 38.00  
**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 85 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. O'Brien, Frank, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 State St  
Ste 1500

City Boston State MA Zip Code 02109-3542

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

Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt  
11 / 29 / 2016  
**Transaction ID : 2016112914135-36**

Amount of Each Receipt this Period  
28.75

Memo Item

**B. O'Brien, Frank, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 State St  
Ste 1500

City Boston State MA Zip Code 02109-3542

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

Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt  
12 / 14 / 2016  
**Transaction ID : 2016121415133-36**

Amount of Each Receipt this Period  
28.75

Memo Item

**C. O'Brien, Frank, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 State St  
Ste 1500

City Boston State MA Zip Code 02109-3542

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

Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Relat

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ 940.00

Date of Receipt  
12 / 29 / 2016  
**Transaction ID : 2016122912138-37**

Amount of Each Receipt this Period  
28.75

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 86.25

**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 86 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Rourke, Kathleen, E, ,

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago	State IL	Zip Code 60631-3512
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PCI	Occupation (for Individual) Director, MIS Applications
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
630.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2016

**Transaction ID : 2016112914135-38**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Rourke, Kathleen, E, ,

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago	State IL	Zip Code 60631-3512
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PCI	Occupation (for Individual) Director, MIS Applications
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
630.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2016

**Transaction ID : 2016121415133-38**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Rourke, Kathleen, E, ,

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago	State IL	Zip Code 60631-3512
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PCI	Occupation (for Individual) Director, MIS Applications
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
630.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2016

**Transaction ID : 2016122912138-39**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 87 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Orfanos, Joanne, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Membership and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-37**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Orfanos, Joanne, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Membership and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : F91305FB7C8E46EE92C1**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. Orfanos, Joanne, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Membership and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-37**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**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 88 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Orfanos, Joanne, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Membership and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-38**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Orth, Leo, M, , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Vice President Research & Developme  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-19**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Passmore, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Personal Lin  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-39**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 160.00  
**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 89 OF 142 (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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Passmore, Robert, , ,</b>		Date of Receipt			
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 12</td> <td style="width:33%; text-align: center;">D D D 14</td> <td style="width:33%; text-align: center;">Y Y Y Y Y Y 2016</td> </tr> </table>	M M M 12	D D D 14	Y Y Y Y Y Y 2016
M M M 12	D D D 14	Y Y Y Y Y Y 2016			
City Chicago      State IL      Zip Code 60631-3512		<b>Transaction ID : 2016121415133-39</b>			
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00			
Name of Employer (for Individual) PCI      Occupation (for Individual) Assistant Vice President, Personal Lin		<input type="checkbox"/> Memo Item			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00				

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Passmore, Robert, , ,</b>		Date of Receipt			
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 12</td> <td style="width:33%; text-align: center;">D D D 29</td> <td style="width:33%; text-align: center;">Y Y Y Y Y Y 2016</td> </tr> </table>	M M M 12	D D D 29	Y Y Y Y Y Y 2016
M M M 12	D D D 29	Y Y Y Y Y Y 2016			
City Chicago      State IL      Zip Code 60631-3512		<b>Transaction ID : 2016122912138-40</b>			
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00			
Name of Employer (for Individual) PCI      Occupation (for Individual) Assistant Vice President, Personal Lin		<input type="checkbox"/> Memo Item			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00				

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pitcher, Daniel, D, ,</b>		Date of Receipt			
Mailing Address 5400 University Ave		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 12</td> <td style="width:33%; text-align: center;">D D D 16</td> <td style="width:33%; text-align: center;">Y Y Y Y Y Y 2016</td> </tr> </table>	M M M 12	D D D 16	Y Y Y Y Y Y 2016
M M M 12	D D D 16	Y Y Y Y Y Y 2016			
City West Des Moines      State IA      Zip Code 50266-5950		<b>Transaction ID : 2016121613132-20</b>			
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 225.00			
Name of Employer (for Individual) FBL Financial Group      Occupation (for Individual) Chief Operating Officer, PC Companies		<input type="checkbox"/> Memo Item			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4350.00				

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	245.00
<b>TOTAL</b> 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 90 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Poirier, Richard, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : F3267D95A10849BEBDE9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Poirier, Richard, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : AFFEAAAC6C0C4D318351**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Price, Terry, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Systems Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-21**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<b>TOTAL</b> 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 91 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ramell, Richard, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 N 12th St  
 City Lemoyne State PA Zip Code 17043-1241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Ramell, Richard, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 N 12th St  
 City Lemoyne State PA Zip Code 17043-1241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Ramell, Richard, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 N 12th St  
 City Lemoyne State PA Zip Code 17043-1241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Branch Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122916132-8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 92 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Richards, Paul, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-20**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Richards, Paul, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-48**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Richards, Paul, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-76**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**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 93 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Richards, Paul, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-48**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Richards, Paul, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-20**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Ricucci, Debra, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Claims Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-49**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 50.00  
**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 94 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ricucci, Debra, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Claims Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-21**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Ricucci, Debra, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Claims Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-21**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Ricucci, Debra, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Claims Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-49**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 95 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ricucci, Debra, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Claims Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-77**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Roder, Christina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-22**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Roggenbaum, Doug, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-22**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> 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 96 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Roggenbaum, Doug, R, ,**

Mailing Address 26777 Halsted Rd

City Farmington Hills    State MI    Zip Code 48331-3577

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

Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1110.00

Date of Receipt  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-50**

Amount of Each Receipt this Period  
 40.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Roggenbaum, Doug, R, ,**

Mailing Address 26777 Halsted Rd

City Farmington Hills    State MI    Zip Code 48331-3577

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

Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1110.00

Date of Receipt  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-78**

Amount of Each Receipt this Period  
 40.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Roggenbaum, Doug, R, ,**

Mailing Address 26777 Halsted Rd

City Farmington Hills    State MI    Zip Code 48331-3577

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

Name of Employer (for Individual) Amerisure Companies    Occupation (for Individual) Vice President

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 1110.00

Date of Receipt  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-50**

Amount of Each Receipt this Period  
 40.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00

**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 97 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Roggenbaum, Doug, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-22**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Root, Kevin, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Senior Vice President - Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : E8B1D8B4269C4FDB8C71**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Ruthruff, Todd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd Ste 200  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Relationship Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-51**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	365.00
<b>TOTAL</b> 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 98 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ruthruff, Todd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 200  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Amerisure Companies Chief Relationship Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-23**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Ruthruff, Todd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 200  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Amerisure Companies Chief Relationship Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-23**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Ruthruff, Todd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 200  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Amerisure Companies Chief Relationship Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-51**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 99 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Ruthruff, Todd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 Ste 200  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Chief Relationship Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt **12 / 19 / 2016**  
**Transaction ID : 2016121915433-79**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Sampson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 29 / 2016**  
**Transaction ID : 2016112914135-41**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Sampson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 14 / 2016**  
**Transaction ID : 2016121415133-41**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	441.66
<b>TOTAL</b> 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 100 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Sampson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-43**  
 Amount of Each Receipt this Period  
 208.41  
 Memo Item

**B. Santulli, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President, Risk Service  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-9**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Santulli, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President, Risk Service  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-9**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	248.41
<b>TOTAL</b> 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 101 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Santulli, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Executive Vice President, Risk Service  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-9**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Schloemer, Mark, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 E Broad St  
 City Columbus State OH Zip Code 43215-3901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Auto Insurance Companies Occupation (for Individual) Deputy Director, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : DBB3F2D360284697AD89**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Scholl, Eric, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : C0241C2116DD4456BCC3**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	530.00
<b>TOTAL</b> 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 102 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Schuhl, Kurt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Senior Vice President and Chief Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2016  
**Transaction ID : 2016120516133-10**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Schuhl, Kurt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Senior Vice President and Chief Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-10**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Schuhl, Kurt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Senior Vice President and Chief Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122916132-10**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 103 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Segura, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 626.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-42**  
 Amount of Each Receipt this Period 11.50  
 Memo Item

**B. Segura, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 626.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-42**  
 Amount of Each Receipt this Period 11.50  
 Memo Item

**C. Segura, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 626.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-44**  
 Amount of Each Receipt this Period 11.50  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 34.50  
**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 104 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Seibel, Donald, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Chief Financial Officer and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-25**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Seiboldt, Jay, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Claims, Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-26**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**C. Sektnan, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 L St Ste 670  
 City Sacramento State CA Zip Code 95814-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Relat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2034.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-43**  
 Amount of Each Receipt this Period  
 26.11  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166.11
<b>TOTAL</b> 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 105 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Sektnan, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 L St  
 Ste 670  
 City Sacramento State CA Zip Code 95814-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2034.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-43**  
 Amount of Each Receipt this Period  
 67.09  
 Memo Item

**B. Sektnan, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 L St  
 Ste 670  
 City Sacramento State CA Zip Code 95814-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2034.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-45**  
 Amount of Each Receipt this Period  
 67.09  
 Memo Item

**C. Sewell, Bridget, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-10**  
 Amount of Each Receipt this Period  
 34.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 168.18  
**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 106 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Sewell, Bridget, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-10**  
 Amount of Each Receipt this Period  
 34.00  
 Memo Item

**B. Sewell, Bridget, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2016  
**Transaction ID : BAF03B9C6E1849008765**  
 Amount of Each Receipt this Period  
 1.00  
 Memo Item

**C. Sewell, Bridget, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Political Engagement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-11**  
 Amount of Each Receipt this Period  
 34.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.00
<b>TOTAL</b> 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 107 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Shepherd, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Membership a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-44**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Shepherd, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Membership a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-44**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Shepherd, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Assistant Vice President, Membership a  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122912138-46**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 108 OF 142
	<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Shiel, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Insurance Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-45**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Shiel, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Insurance Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-45**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Shiel, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) AVP, Insurance Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-47**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 109 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Shryack, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 FBL Financial Group Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-28**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Simon, Matthew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Amerisure Companies Vice President & Chief Financial Offic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-24**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Simon, Matthew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Amerisure Companies Vice President & Chief Financial Offic  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-52**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 110 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Simon, Matthew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Chief Financial Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-80**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Simon, Matthew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Chief Financial Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-52**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Simon, Matthew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President & Chief Financial Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-24**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 111 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Skorzyk, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) Director of Commercial Sales and Mark  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : 907D0FC39C274CC7BC48**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Smith, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : DF441D2C25D147B73BA**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Smith, Melanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government R  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-46**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 112 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Smith, Melanie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago State IL Zip Code 60631-3512

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

Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government F

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
12 / 14 / 2016  
**Transaction ID : 2016121415133-46**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. Smith, Melanie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City Chicago State IL Zip Code 60631-3512

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

Name of Employer (for Individual) PCI Occupation (for Individual) Regional Manager, State Government I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
12 / 29 / 2016  
**Transaction ID : 2016122912138-48**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Smith, Sara, D, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 N Higgins Ave  
Ste 200

City Missoula State MT Zip Code 59802-4401

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

Name of Employer (for Individual) ALPS Property & Casualty Insurance Com Occupation (for Individual) Chief Financial Officer

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
12 / 01 / 2016  
**Transaction ID : 09C54617DAA14677BC79**

Amount of Each Receipt this Period  
600.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 113 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Snell, Oyango, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1380.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-47**  
 Amount of Each Receipt this Period  
 57.50  
 Memo Item

**B. Snell, Oyango, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1380.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-47**  
 Amount of Each Receipt this Period  
 57.50  
 Memo Item

**C. Snell, Oyango, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Counsel, State Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1380.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-49**  
 Amount of Each Receipt this Period  
 57.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	172.50
<b>TOTAL</b> 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 114 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Snyder, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, International Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-48**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Snyder, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, International Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-48**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Snyder, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, International Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-50**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 115 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Spaude, Christopher, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-25**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Spaude, Christopher, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-53**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Spaude, Christopher, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-25**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 116 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Spaude, Christopher, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-53**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Spaude, Christopher, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-81**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Spina, Mario, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Sales Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-11**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 117 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Spina, Mario, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : 2016121213133-11**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Spina, Mario, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122916132-11**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Stanton, Victoria, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 Route 9W  
 City Glenmont State NY Zip Code 12077-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farm Family Insurance Companies Occupation (for Individual) Executive Vice President, General Coun  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2016  
**Transaction ID : E2DF7244F929B1C706D**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1220.00
<b>TOTAL</b> 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 118 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Steffen, Jeffrey, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President - Chief Financial Offic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : 5D610689A5064ED9B476**  
 Amount of Each Receipt this Period 301.00  
 Memo Item

**B. Steinberg, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : 0CED3DD2B7D340628831**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Stockwell, Francis, A, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14280 Park Meadow Dr 300  
 City Chantilly State VA Zip Code 20151-2280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Medmarc Insurance Group Occupation (for Individual) Vice President and Chief Underwriting  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 1C4464DDF36F455BB8F3**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	851.00
<b>TOTAL</b> 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 119 OF 142
	<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Strickler, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Manager, Political Engagement - Feder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 928.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-50**  
 Amount of Each Receipt this Period  
 29.00  
 Memo Item

**B. Strickler, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Manager, Political Engagement - Feder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 928.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-50**  
 Amount of Each Receipt this Period  
 29.00  
 Memo Item

**C. Strickler, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Manager, Political Engagement - Feder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 928.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-52**  
 Amount of Each Receipt this Period  
 29.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> 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 120 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Suchara, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President - IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-26**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Suchara, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President - IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-54**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Suchara, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President - IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-82**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 121 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Suchara, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President - IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-54**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Suchara, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Vice President - IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-26**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Szabo, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-55**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 122 OF 142  
(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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Szabo, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 2016120116539-27**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Szabo, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-27**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Szabo, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-55**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 123 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Szabo, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : 2016121915433-83**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Szalacinski, Jeffrey, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President-Claims  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : 060149B9BD4E415388F4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Szalacinski, Jeffrey, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 Schuster Ln  
 City Merrill State WI Zip Code 54452-3863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Church Mutual Insurance Group Occupation (for Individual) Vice President-Claims  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : BA1C3CE797F44D4E8D70**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00  
**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 124 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Thomas, Courtney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Meetings Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-52**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Thomas, Courtney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Meetings Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-52**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Thomas, Courtney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Director, Meetings Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-54**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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 125 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Tobis, Lori Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-28**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Tobis, Lori Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : 2016120116539-56**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Tobis, Lori Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-84**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**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 126 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Tobis, Lori Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-56**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Tobis, Lori Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26777 Halsted Rd  
 City Farmington Hills State MI Zip Code 48331-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amerisure Companies Occupation (for Individual) Supervising Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016  
**Transaction ID : 2016121915433-28**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Trivella, Anthony, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 State St  
 City Hartford State CT Zip Code 06103-3100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hartford Steam Boiler Group Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 74C552387EE598C8645**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	290.00
<b>TOTAL</b> 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 127 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Turi, Bernard, J, , Esq.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Genesee St  
 City New Hartford State NY Zip Code 13413-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Utica National Insurance Group Occupation (for Individual) SVP, General Counsel, General Auditor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 06 / 2016  
**Transaction ID : 0D76063A6302C943927**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Vangenderen, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Insurance Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : 2016121613132-30**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Walsh, James, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell State PA Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group Occupation (for Individual) Vice President - Claims  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : 2016120516133-12**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	530.00
<b>TOTAL</b> 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 128 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Walsh, James, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell    State PA    Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group    Occupation (for Individual) Vice President - Claims  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121213133-12**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Walsh, James, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 Sentry Pkwy  
 City Blue Bell    State PA    Zip Code 19422-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PMA Insurance Group    Occupation (for Individual) Vice President - Claims  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122916132-12**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Walsh, Timothy, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 Route 9W  
 City Glenmont    State NY    Zip Code 12077-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farm Family Casualty Insurance Company    Occupation (for Individual) President, Chief Executive Officer  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : 2016121217132-1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 129 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Walsh, Timothy, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 Route 9W  
 City Glenmont State NY Zip Code 12077-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farm Family Casualty Insurance Company Occupation (for Individual) President, Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 2016122917137-1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Welch, Martin, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Alakea St Ste 1400  
 City Honolulu State HI Zip Code 96813-2834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hawaii Employers Mutual Insurance Comp Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : 45210159FA4848CFB71A**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Werbeckes, Jim, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10375 Professional Cir  
 City Reno State NV Zip Code 89521-4802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Employers Holdings, Inc. Occupation (for Individual) Vice President, Government and Regula  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : 156DEF787565B69DA66**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 130 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Whitt, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Membership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-53**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Whitt, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Membership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-53**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Whitt, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Director, Membership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-55**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 131 OF 142
<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)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Wienecke, Chantal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 W Bryn Mawr Ave  
 Ste 1200S  
 City Chicago State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI PAC Contributors Occupation (for Individual) PCI Employee's Spouse  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 12 / 13 / 2016  
**Transaction ID : DADE2B4DF53E4A2FB16C**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. Wienecke, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Federal Governr  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : 2016112914135-54**  
 Amount of Each Receipt this Period 167.00  
 Memo Item

**C. Wienecke, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Federal Governr  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : 2016121415133-54**  
 Amount of Each Receipt this Period 167.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	534.00
<b>TOTAL</b> 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 132 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Wienecke, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Senior Vice President, Federal Governn  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-56**  
 Amount of Each Receipt this Period  
 167.00  
 Memo Item

**B. Wittmuss, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5400 University Ave  
 City West Des Moines State IA Zip Code 50266-5950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FBL Financial Group Occupation (for Individual) Commercial Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2016  
**Transaction ID : 2016121613132-31**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Woods, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Relat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-55**  
 Amount of Each Receipt this Period  
 58.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.34
<b>TOTAL</b> 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 133 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Woods, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-55**  
 Amount of Each Receipt this Period  
 58.34  
 Memo Item

**B. Woods, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 San Antonio St  
 City Austin State TX Zip Code 78701-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, State Government Rela  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-57**  
 Amount of Each Receipt this Period  
 58.18  
 Memo Item

**C. Woody, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2016  
**Transaction ID : 2016112914135-56**  
 Amount of Each Receipt this Period  
 28.75  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.27  
**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 134 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Woody, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : 2016121415133-56**  
 Amount of Each Receipt this Period  
 28.75  
 Memo Item

**B. Woody, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 N Capitol St NW  
 Ste 801  
 City Washington State DC Zip Code 20001-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCI Occupation (for Individual) Vice President, Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : 2016122912138-58**  
 Amount of Each Receipt this Period  
 28.75  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	57.50
<b>TOTAL</b> This Period (last page this line number only).....	33637.28

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

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

FOR LINE NUMBER: PAGE 135 OF 142  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Shelter Mutual Insurance Company Federal PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1817 West Broadway  
 City Columbia State MO Zip Code 65218  
 FEC ID number of contributing federal political committee. **C** C00140384  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2016  
**Transaction ID : CE1A1E29177B4087B6D2**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 136 OF 142
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

**A. Property Casualty Insurers Association of America**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 West Bryn Mawr Ave  
 City Chicago State IL Zip Code 60631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10855.15

Date of Receipt  
 11 / 29 / 2016  
**Transaction ID : 04D9B21C6A27427D833E**  
 Amount of Each Receipt this Period  
 1155.52  
 Memo Item  
 Offset Operating Exp Nov 2016

**B. Property Casualty Insurers Association of America**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 West Bryn Mawr Ave  
 City Chicago State IL Zip Code 60631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10855.15

Date of Receipt  
 12 / 29 / 2016  
**Transaction ID : 09DD6B5F8FF24E9E99B7**  
 Amount of Each Receipt this Period  
 777.90  
 Memo Item  
 Offset Operating Exp Dec 2016

**C. Property Casualty Insurers Association of America**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 West Bryn Mawr Ave  
 City Chicago State IL Zip Code 60631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 10855.15

Date of Receipt  
 12 / 30 / 2016  
**Transaction ID : 9F60A2412F3643948102**  
 Amount of Each Receipt this Period  
 1.75  
 Memo Item  
 Offset Operating Exp Dec 2016 #2

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1935.17
<b>TOTAL</b> This Period (last page this line number only).....	1935.17



**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement Merchant CC Fee 12-01-2016

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : A86C6EF167I

Amount of Each Disbursement this Period

[REDACTED] 145.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement BOA CC Fees 12-05-2016

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : C813EA87DD

Amount of Each Disbursement this Period

[REDACTED] 318.23

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement Merchant CC Fees 12-08-2016

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : DAA17AC35I

Amount of Each Disbursement this Period

[REDACTED] 180.79

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 644.07

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

[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2016

Mailing Address 135 S LaSalle Street, 7th Floor

FEC Identification Number

**C** [Redacted]

**Transaction ID : 7C7EC7ECE3**  
Amount of Each Disbursement this Period

[Redacted] 1.75

Memo Item

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Merchant CC Fees 12-12-2016

**001**  
Category/  
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2016

Mailing Address 135 S LaSalle Street, 7th Floor

FEC Identification Number

**C** [Redacted]

**Transaction ID : D947D605C91**  
Amount of Each Disbursement this Period

[Redacted] 31.88

Memo Item

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Clover CC Fees 12-12-2016

**001**  
Category/  
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2016

Mailing Address 135 S LaSalle Street, 7th Floor

FEC Identification Number

**C** [Redacted]

**Transaction ID : 98E7DA398C**  
Amount of Each Disbursement this Period

[Redacted] 35.40

Memo Item

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Merchant CC Fees 12-13-2016

**001**  
Category/  
Type

Candidate Name

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

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[Redacted] 69.03

[Redacted]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Merchant CC Fees 12-22-2016

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : C010952DC2I**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Merchant CC Fees 12-28-2016

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 73A7FE8406E**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 135 S LaSalle Street, 7th Floor

City Chicago State IL Zip Code 60603

Purpose of Disbursement  
Merchant CC Fees 12-29-2016

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 38AE31F309I**  
 Amount of Each Disbursement this Period

Memo Item

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

### A. Bank of America

Mailing Address 135 S LaSalle Street, 7th Floor

City  
Chicago

State  
IL

Zip Code  
60603

Purpose of Disbursement  
Merchant CC Fees 12-30-2016

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			30			2016			

FEC Identification Number

C [ ]

Transaction ID : D13A1924C3I

Amount of Each Disbursement this Period

[ ] 1.75

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 1.75

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

[ ] 779.65

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Todd Young, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2016

Mailing Address PO Box 1053

FEC Identification Number

**C** C00459255

City Bloomington State IN Zip Code 47402

**Transaction ID : A8B8CA7636**

Purpose of Disbursement  
2016 General Debt Retirement

**011**  
Category/  
Type

Amount of Each Disbursement this Period

2500.00

Candidate Name  
**Young, Todd, Christopher, ,**

Memo Item

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IN District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Memo Item

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

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Memo Item

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

**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

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

2500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Property Casualty Insurers Association of America Political Action Committee (PCIPAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Ian Conyers**

Mailing Address 19000 Birchcrest Dr.

City Detroit State MI Zip Code 48221

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2016

FEC Identification Number

**C** [Redacted]

**Transaction ID : 6C77738A5C:**  
Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Riggs for Representative**

Mailing Address P.O. Box 24586

City Louisville State KY Zip Code 40224

Purpose of Disbursement  
Voided 9/23/16 contribution

011
Category/ Type

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	07	/	2016

FEC Identification Number

**C** [Redacted]

**Transaction ID : A6E2FF9990L**  
Amount of Each Disbursement this Period

[Redacted] -250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Riggs for Representative**

Mailing Address P.O. Box 24586

City Louisville State KY Zip Code 40224

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2016

FEC Identification Number

**C** [Redacted]

**Transaction ID : 55313F62D7:**  
Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

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

500.00
500.00