

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ONE GEICO PLAZA  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20076

2. **FEC IDENTIFICATION NUMBER** C00343749  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of \_\_\_\_\_

5. Covering Period 10 01 2010 through 11 22 2010

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

Signature of Treasurer Electronically Filed by Michael Campbell Date 12 01 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		41857.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	11517.52									
(c) Total Receipts (from Line 19) .....	1739.00	19919.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	13256.52	61776.52								
7. Total Disbursements (from Line 31) .....	0.00	48520.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	13256.52	13256.52								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1250.00	8575.00
(ii) Unitemized .....	489.00	11344.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1739.00	19919.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1739.00	19919.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1739.00	19919.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1739.00	19919.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	48000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	48520.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	48520.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1739.00	19919.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1739.00	19919.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	20.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	20.00

**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 6 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol Black		Date of Receipt
	Mailing Address 15237 Briar Cliff Manor Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Burtonsville	MD	20866
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21103
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 220.00	Payroll deduction \$10.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Robin Burdick		Date of Receipt
	Mailing Address 2534 Crews Lake Hills		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lakeland	FL	33813
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21108
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 220.00	Payroll deduction \$10.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Campbell		Date of Receipt
	Mailing Address 12534 Ansin Circle Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Potomac	MD	20854
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21109
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 220.00	Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 60.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Lily Hopkins		Date of Receipt
	Mailing Address 12962 Marcy Ranch Rd		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Santa Ana	CA	92705
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17030
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="220.00"/>	Payroll deduction \$10.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt
	Mailing Address 1419 Idlewild Blvd		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fredericksburg	VA	22401
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21127
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="550.00"/>	Payroll deduction \$25.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Kidd		Date of Receipt
	Mailing Address 4645 Buckhorn Ridge		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fairfax	VA	22030
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21130
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="330.00"/>	Payroll deduction \$15.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Lavrey		Date of Receipt
	Mailing Address 3495 Pleasant Grove Drive		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ljamsville	MD	21754
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21136
Name of Employer GEICO		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="440.00"/>	Payroll deduction \$20.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) John W McCutcheon		Date of Receipt
	Mailing Address 19218 Tattershall Drive		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Germantown	MD	20874
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21148
Name of Employer GEICO		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="440.00"/>	Payroll deduction \$20.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul W Measley		Date of Receipt
	Mailing Address 9539 E. Surprise Canyon Ct.		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tucson	AZ	85748
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21151
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="440.00"/>	Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="120.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: PAGE 9 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Robert Miller

Mailing Address 3025 Amherst Avenue

City State Zip Code  
Dallas TX 75225

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

Name of Employer Occupation  
GEICO Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21152

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**B.** Full Name (Last, First, Middle Initial)  
Janice Minshall

Mailing Address 1006 Ramsey Street

City State Zip Code  
Alexandria VA 22301

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

Name of Employer Occupation  
GEICO AVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21153

Amount of Each Receipt this Period  
20.00

Payroll deduction \$10.00 biweekly

**C.** Full Name (Last, First, Middle Initial)  
Diane Monk

Mailing Address 694 White Bluff Dr

City State Zip Code  
Fayetteville AR 72701

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

Name of Employer Occupation  
GEICO manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21154

Amount of Each Receipt this Period  
20.00

Payroll deduction \$10.00 biweekly

**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 10 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Musolf	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 123 Cross Creek Circle	<b>Transaction ID:</b> SA11AI.21157
	City State Zip Code Macon GA 31210	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$5.00 biweekly
	Name of Employer Occupation GEICO manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Olza Nicely	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 805 Nethercliffe Hall Road	<b>Transaction ID:</b> SA11AI.21159
	City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 170.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$85.00 biweekly
	Name of Employer Occupation GEICO President-Insurance operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Steve Clark Parsons	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1710 Rupert Street	<b>Transaction ID:</b> SA11AI.21163
	City State Zip Code Mclean VA 22101	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly
	Name of Employer Occupation GEICO AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<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 11 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Terrence Perkins		Date of Receipt	
	Mailing Address 1603 Dickens Place		M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.21165
	Upper Marlboro	MD	20772	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.00	
Name of Employer		Occupation		Payroll deduction \$5.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		220.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt	
	Mailing Address 19318 Wilmott Drive		M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.21167
	Benedict	MD	20612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		80.00	
Name of Employer GEICO		Occupation VP		Payroll deduction \$40.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		880.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Dina D Pon		Date of Receipt	
	Mailing Address 698 Martin Luther King Jr Blvd Apt 12		M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.21169
	Macon	GA	31201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.00	
Name of Employer GEICO		Occupation		Payroll deduction \$5.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<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 12 / 16  
(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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dana Proulx

Mailing Address 1011 Avery Court, S.W.

City State Zip Code  
Vienna VA 22180

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

Name of Employer Occupation  
GEICO manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21170

Amount of Each Receipt this Period  
50.00

Payroll deduction \$25.00 biweekly

**B.** Full Name (Last, First, Middle Initial)  
John W Quagliato

Mailing Address 924 Beacon Square Court #326

City State Zip Code  
Gaithersburg MD 20878

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

Name of Employer Occupation  
GEICO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21171

Amount of Each Receipt this Period  
40.00

Payroll deduction \$20.00 biweekly

**C.** Full Name (Last, First, Middle Initial)  
William Roberts

Mailing Address 708 STILLWATER ROAD

City State Zip Code  
GIBSON ISLAND MD 21056

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

Name of Employer Occupation  
GEICO VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21174

Amount of Each Receipt this Period  
150.00

Payroll deduction \$75.00 biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **240.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 16  
(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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) George Rogers		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 5120 Highlands By The Lake Drive		Transaction ID: SA11AI.21175
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$10.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

**B.**

Full Name (Last, First, Middle Initial) Charles Schara		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 1150 Old Tolson Mill Road		Transaction ID: SA11AI.21179
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$10.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

**C.**

Full Name (Last, First, Middle Initial) Jonathan L Shafner		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 6108 Wayside Dr		Transaction ID: SA11AI.21181
City North Bethesda	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GEICO	Occupation manager	Payroll deduction \$5.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<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 14 / 16  
(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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Louis Simpson

Mailing Address 700 Kings Town Drive

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
Plaza Investment Managers President - Capital operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21183

Amount of Each Receipt this Period  
100.00

Payroll deduction \$50.00 biweekly

**B.**

Full Name (Last, First, Middle Initial)  
Kushwant Singh

Mailing Address 21209 Emerald Drive

City State Zip Code  
Germantown MD 20876

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

Name of Employer Occupation  
GEICO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21184

Amount of Each Receipt this Period  
20.00

Payroll deduction \$10.00 biweekly

**C.**

Full Name (Last, First, Middle Initial)  
Frank Tate

Mailing Address 306 Hassellwood Drive

City State Zip Code  
Cary NC 27511

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

Name of Employer Occupation  
GEICO Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.21187

Amount of Each Receipt this Period  
20.00

Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

**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 / 16
	<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)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21190
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="550.00"/>	<input type="text" value="50.00"/>
			Payroll deduction \$25.00 biweekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Wingert		Date of Receipt
	Mailing Address 9321 Walking Horse Ct		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Springfield	VA	22153
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21197
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	<input type="text" value="20.00"/>
			Payroll deduction \$10.00 biweekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
	Mailing Address 219 Westchester Drive		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Macon	GA	31210
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.21199
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="40.00"/>
			Payroll deduction \$20.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="110.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
John Zinno

Mailing Address 1601 Gayle Terrace

City State Zip Code  
Fredericksburg VA 22401

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GEICO AVP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.21200

Amount of Each Receipt this Period  
20.00

Payroll deduction \$10.00  
biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">20.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">1250.00</span>