Image# 201807269119320810			_		PAGE 1 / 70
	PORT OF IND DISBUR	SEMENT	S	Office U	Jse Only
1. NAME OF TYP COMMITTEE (in full)	e or print ▼	Example: If typi over the lines.	ng, type	2FE4M5	
Selective Insurance Comp	oany of America Po	blitical Action (
ADDRESS (number and street)) Wantage Ave				
Check if different than previously reported. (ACC)	ranchville		N		00 -]
2. FEC IDENTIFICATION NUMB	ER ▼ CITY	´ ▲	STA	TE 🔺	ZIP CODE
C C00550889	3. IS RE		NEW (N) OR	X AMENDED (A))
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 	Report Due On: Apr 2 (C) 12-Day	20 (M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10 General (12G)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)	PRE-Election Report for the: Election	Convention		Special (12S)	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (30)	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on/	D = D / Y =	YYYY	in the State of
5. Covering Period	01 / Y Y Y 2017	through	06/		D17
I certify that I have examined this Re B Type or Print Name of Treasurer	eport and to the best of r eck, Jeffrey, , ,	ny knowledge and	belief it is true, c	correct and comple	ete.
Signature of Treasurer	ey, , ,	[Electronicall	y Filed] Date	07/ D	6 / Y Y Y Y Y 2018
NOTE: Submission of false, erroneous,	or incomplete information	may subject the per	son signing this F	Report to the penal	ties of 52 U.S.C. § 3010
Office Use Only					C FORM 3X Rev. 05/2016

07/26/2018 15 : 45 PAGE 1 / 70

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

Selective Insurance Company of America Political Action Committee

R	eport Covering the Period: From:		To: 06 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		42426.18
	(b) Cash on Hand at Beginning of Reporting Period	42426.18	
	(c) Total Receipts (from Line 19)	23721.42	23721.42
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	66147.60	66147.60
7.	Total Disbursements (from Line 31)	32300.00	32300.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33847.60	33847.60
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Selective Insurance Company of America Political Action Committee

Report Covering the Period: From:	01 / Y Y Y Y 01 / 2017 To	06 / D D / Y Y Y Y 2017
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	40000 50	10000 50
(i) Itemized (use Schedule A)	18383.58	18383.58
(ii) Unitemined	5337.84	5337.84
(ii) Unitemized (iii) TOTAL (add	3337.04	
Lines 11(a)(i) and (ii)	23721.42	23721.42
(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)	23721.42	23721.42
12. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	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	0.00	0.00
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	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(47. 47. 48.	4
(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))▶	23721.42	23721.42
20. Total Federal Receipts	00704 40	
(subtract Line 18(c) from Line 19)▶	23721.42	23721.42

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 15500.00 and Other Political Committees... 15500.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 16800.00 16800.00 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 Total Federal Election Activity (add (C) 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)).. 32300.00 32300.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 32300.00 32300.00

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	23721.42	23721.42
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23721.42	23721.42
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
 Net Operating Expenditures (subtract Line 37 from Line 36) 	0.00	0.00

FOR LINE NUMBER:

PAGE

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			Use separate schedule(s)			(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the		oose of	soliciting	g contribu	tions		
\backslash	NAME OF COMMITTEE (In Full)											
	Selective Insurance Company of	America	a Political Action Comr	nittee	•							
A.	Full Name of Individual (Last, First, Middle Initia Adams, Charles, C., ,	al) or Full O	rganization Name	D	ate of	Re	ceipt					
	Mailing Address 203 Windsor Dr				м м 04	/	D D 28	/ Y	y y 2017	Ŷ		
	City Northampton	State PA	Zip Code 18067-1780						947F620	444F969		
	FEC ID number of contributing federal political committee.	С					-		23.	08		
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Regional Manager		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.72									
В.	Full Name of Individual (Last, First, Middle Initia Adams, Charles, C., ,	al) or Full O	rganization Name	D	ate of	Re	ceipt					
	Mailing Address 203 Windsor Dr					1	D D D 12	/ Y	2017	Y		
	City Northampton	State PA	Zip Code 18067-1780						C8286CA	489CA62		
	FEC ID number of contributing federal political committee.	C					-		23.	08		
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Regional Manager		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate										
С.	Full Name of Individual (Last, First, Middle Initia Adams, Charles, C., ,	al) or Full O	rganization Name	D	ate of	Re	ceipt					
	Mailing Address 203 Windsor Dr	_		44	^M 05	/	26	JL	ү ү 2017			
	City Northampton	State PA	Zip Code 18067-1780						CBF6A7	C446F80F		
	FEC ID number of contributing federal political committee.	С		ļ			y	y	23.	08		
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Regional Manager		M	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 253.88									
s	UBTOTAL of Receipts This Page (optional)						, .		69.	24		
Т	OTAL This Period (last page this line number o	nly)		Ī			,					

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PAGE

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		Use separate schedule(s) for each category of the	(check only one)					
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
Selective Insurance Compa	any of America	a Political Action Com	mittee					
Full Name of Individual (Last, First, Mid A. Adams, Charles, C., ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 203 Windsor Dr			06 / Y Y Y Y Y 06 09 2017					
City Northampton	State PA	Zip Code 18067-1780	Transaction ID : A8DC9A1BC23014D0BB7 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		23.08					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Regional Manager	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.96]					
Full Name of Individual (Last, First, Mid B. Adams, Charles, C., ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 203 Windsor Dr	06 23 2017							
City Northampton	State PA	Zip Code 18067-1780	Transaction ID : AD242521FECEF45C8847 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		23.08					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 2, Regional Manager	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.04]					
Full Name of Individual (Last, First, Mid C. Anderson, Allen, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2 Windy Brow Mnr								
City Fredon	State NJ	Zip Code 07860-5381	Transaction ID : A2B46B98F15C24951AB0 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.46					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Chief UW Officer P/L	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76]					
SUBTOTAL of Receipts This Page (option	nal)		84.62					
TOTAL This Period (last page this line nu	Imber only)							

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			Use separate schedule(s)			(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	F	12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Selective Insurance Company of	America	a Political Action Com	nittee	9							
A.	Full Name of Individual (Last, First, Middle Initia Anderson, Allen, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 2 Windy Brow Mnr				м м 03	1	D 31			2017	Y	
	City Fredon	State NJ	Zip Code 07860-5381	A				A4E3F Receipt			7128E6	
	FEC ID number of contributing federal political committee.	C					7		_	38.4	6	
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Chief UW Officer P/L		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.22									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Anderson, Allen, , , Mailing Address 2 Windy Brow Mnr				Date of	Re /	D D	/		YY	Ŷ	
	City Fredon	State NJ	Zip Code 07860-5381					AE565 leceipt	DD2		C45AEB	
	FEC ID number of contributing federal political committee.	C					,		_	38.4	6	
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief UW Officer P/L		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.68									
С.	Full Name of Individual (Last, First, Middle Initia Anderson, Allen, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 2 Windy Brow Mnr					/	28			2017	Y	
	City Fredon	State NJ	Zip Code 07860-5381	A				AFD15 Receipt			42709B8	
	FEC ID number of contributing federal political committee.	C					y :	. ,	_	38.4	6	
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) , Chief UW Officer P/L		M	emo	ltem					
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14									
s	UBTOTAL of Receipts This Page (optional)		•••••	[, .	. ,		115.3	8	
т	OTAL This Period (last page this line number o	nly)					,					

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		Use separate schedule(s)	(chec	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b	11c	12 16	17	
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NAME OF COMMITTEE (In Full) Selective Insurance Company	of Americ	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middle In A. Anderson, Allen, , ,	itial) or Full C	rganization Name	Da	ate of	f Re	eceipt				
Mailing Address 2 Windy Brow Mnr			Γ	05	1	D D 12	/ Y	2017	Y	
City Fredon	State NJ	Zip Code 07860-5381						E44F940 his Period	4D41ABB	
FEC ID number of contributing federal political committee.	С					-y		38	.46	
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief UW Officer P/L		M	emc	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60]							
Full Name of Individual (Last, First, Middle In B. Anderson, Allen , , ,	itial) or Full C	rganization Name	Da	ate of	f Re	eceipt				
Mailing Address 2 Windy Brow Mnr				05	1	D D 26	/ Y	y y 2017	Y	
City Fredon	State NJ	Zip Code 07860-5381					-	DEBEBA1	164FA083	
FEC ID number of contributing federal political committee.	С					-7	38	.46		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief UW Officer P/L		M	emc	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06]							
Full Name of Individual (Last, First, Middle In C. Anderson, Allen, , ,	itial) or Full C	rganization Name		ate of	f Re	eceipt				
Mailing Address 2 Windy Brow Mnr			_	06	_	09	/ Y	2017	Y	
City Fredon	State NJ	Zip Code 07860-5381						B7AAB7	8241F8BF	
FEC ID number of contributing federal political committee.	С					, .	ÿ	38	.46	
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:		upation (for Individual) P, Chief UW Officer P/L		М	emo	tem				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52]							
SUBTOTAL of Receipts This Page (optional)						, .	7	115	.38	
TOTAL This Period (last page this line number	only)									

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PAGE 10 OF

		Use separate schedule(s)	(check only one)					
ILWILLD RECEIFIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) Selective Insurance Company	of America	a Political Action Comr	nittee					
Full Name of Individual (Last, First, Middle In Anderson, Allen, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2 Windy Brow Mnr			M M / D D / Y Y Y Y 06 23 2017					
City Fredon	State NJ	Zip Code 07860-5381	Transaction ID : AE6097D3CBBF649DE9 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.46					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief UW Officer P/L	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98]					
Full Name of Individual (Last, First, Middle In B. Anthony, John, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6141 W Park Ave Unit 75			04 / 28 / Y Y Y Y 04 28					
City Chandler	State AZ	Zip Code 85226-1195	Transaction ID : AD9BEDE9D627946F7B Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		25.00					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Regional Manager	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00						
Full Name of Individual (Last, First, Middle In C. Anthony, John, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6141 W Park Ave Unit 75			05 / 12 / Y Y Y Y 05 12					
City Chandler	State AZ	Zip Code 85226-1195	Transaction ID : AC1981BF69D5A48A8B Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		25.00					
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	VP,	upation (for Individual) Regional Manager	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]					
SUBTOTAL of Receipts This Page (optional)			88.46					
TOTAL This Period (last page this line numbe	r only)							

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PAGE 11 OF

ITEMIZED RECEIPTS	Use separate schedule(s)		(check only one)		
II EIWIIZED REGEIFIƏ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17		
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Selective Insurance Compa	iny of Americ	a Political Action Com	nittee		
Full Name of Individual (Last, First, Mide A. Anthony, John, , ,	dle Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 6141 W Park Ave Unit 75			05 26 Y Y Y Y Y 05 26 2017		
City Chandler	State AZ	Zip Code 85226-1195	Transaction ID : A3FE118492B30406F9F7 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		25.00		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Regional Manager	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00]		
Full Name of Individual (Last, First, Mide Anthony, John, , ,	dle Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 6141 W Park Ave Unit 75	State	Zin Code	06 09 2017		
City Chandler	State AZ	Zip Code 85226-1195	Transaction ID : A2DB5804D781D4F9F8A7 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		25.00		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Regional Manager	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]		
Full Name of Individual (Last, First, Mide C. Anthony, John, , ,	dle Initial) or Full C	rganization Name	Date of Receipt		
Unit 75	Mailing Address 6141 W Park Ave Unit 75				
City Chandler	State AZ	Zip Code 85226-1195	Transaction ID : A4BD2F51F85844111B38 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Regional Manager	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00]		
SUBTOTAL of Receipts This Page (option	nal)		75.00		
TOTAL This Period (last page this line nu	mber only)				

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Selective Insurance Compa	iny of America	a Political Action Com	mittee						
Full Name of Individual (Last, First, Mide Beck, Jeffrey, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 35 W Hampton Rd			02 03 2017						
City Philadelphia	State PA	Zip Code 19118-3610	Transaction ID : ABC4800A4AB51481791B Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Govt & Regulatory Af	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) V		230.76]						
Full Name of Individual (Last, First, Mide	dle Initial) or Full O	rganization Name							
B. Beck, Jeffrey, , , Mailing Address 35 W Hampton Rd			Date of Receipt						
City	State	Zip Code	Transaction ID : A9481C71ED4534DAAB38						
Philadelphia	PA	19118-3610	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Govt & Regulatory Af	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		307.68]						
Full Name of Individual (Last, First, Mide C. Beck, Jeffrey, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 35 W Hampton Rd			03 / D D / Y Y Y Y 03 2017						
City Philadelphia	State PA	Zip Code 19118-3610	Transaction ID : A1451339B895A40D488E Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Govt & Regulatory Af	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60]						
SUBTOTAL of Receipts This Page (option	nal)		230.76						
TOTAL This Period (last page this line nu	mber only)		•						

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)				
			Detailed Summary Page	13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Selective Insurance Company of	name and a	ddress of any political committee	to solicit contributions from such committee.				
Α.	Full Name of Individual (Last, First, Middle Initia Beck, Jeffrey, , , Mailing Address 35 W Hampton Rd	al) or Full O	rganization Name	Date of Receipt				
	City Philadelphia	State PA	Zip Code 19118-3610	Transaction ID : A84B399A376204DBDB8 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		76.92				
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	SVF	upation (for Individual) P, Govt & Regulatory Af Year-to-Date ▼ 461.52	Memo Item				
B.	Full Name of Individual (Last, First, Middle Initia Beck, Jeffrey, , ,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 35 W Hampton Rd City Philadelphia FEC ID number of contributing federal political committee.	State PA	Zip Code 19118-3610	03 31 2017 Transaction ID : A84C8368B8FBB4A1FA Amount of Each Receipt this Period 76.92				
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Govt & Regulatory Af	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.44					
с.	Full Name of Individual (Last, First, Middle Initia Beck, Jeffrey, , ,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 35 W Hampton Rd			04 / D D / Y Y Y Y 04 2017				
	City Philadelphia	State PA	Zip Code 19118-3610	Transaction ID : AED079745349640E39F3 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		76.92				
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	SVP	upation (for Individual) , Govt & Regulatory Af Year-to-Date ▼ 615.36	Memo Item				
s	UBTOTAL of Receipts This Page (optional)			230.76				
т	OTAL This Period (last page this line number of	nly)	••••••					

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			Use separate schedule(s) for each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 113 14 15	12 16 17		
or for com	nation copied from such Reports and Stanmercial purposes, other than using the OF COMMITTEE (In Full)	name and a	ddress of any political committee	erson for the purpose of soliciting co to solicit contributions from such co	ntributions		
Sele	ctive Insurance Company of	America	a Political Action Comr	nittee			
A. Beck	ame of Individual (Last, First, Middle Initia , Jeffrey, , ,	al) or Full O	rganization Name	Date of Receipt			
	Address 35 W Hampton Rd				017		
City Philade	elphia	State PA	Zip Code 19118-3610	Transaction ID : A4CE2992F Amount of Each Receipt this F			
	D number of contributing political committee.	С			76.92		
	of Employer (for Individual) ve Insurance Company of America t For:	SVP	upation (for Individual) , Govt & Regulatory Af Year-to-Date ▼	Memo Item			
	Primary General Dther (specify) ▼		692.28				
	ame of Individual (Last, First, Middle Initia c, Jeffrey, , ,	al) or Full O	rganization Name	Data of Pagaint			
	Address 35 W Hampton Rd				017		
City Philade	elphia	State PA	Zip Code 19118-3610	Transaction ID : A3F26F074			
	D number of contributing political committee.	С			76.92		
	of Employer (for Individual) ve Insurance Company of America		upation (for Individual) P, Govt & Regulatory Af	Memo Item			
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.20				
	ame of Individual (Last, First, Middle Initia k, Jeffrey, , ,	al) or Full O	rganization Name	Date of Receipt			
	Address 35 W Hampton Rd			05 26 20	017		
City Philad	lelphia	State PA	Zip Code 19118-3610	Transaction ID : AD15505A8 Amount of Each Receipt this F			
	D number of contributing political committee.	С			76.92		
Selecti	of Employer (for Individual) ive Insurance Company of America		ipation (for Individual) , Govt & Regulatory Af	Memo Item			
	Primary General Dther (specify)	Aggregate	Year-to-Date ▼ 846.12				
SUBTOT	AL of Receipts This Page (optional)				230.76		
TOTAL T	This Period (last page this line number o	nly)	••••••		40		

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ITE			Use separate schedule(s)		(ch	(check only one)					
116	ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		4 11a 13		11b 14	11c	12	17
	information copied from such Reports and S or commercial purposes, other than using the					for the		pose of	soliciting	g contribut	tions
\ N	AME OF COMMITTEE (In Full)										
\rangle s	Selective Insurance Company of	of Americ	a F	Political Action Comr	nitte	e					
	ull Name of Individual (Last, First, Middle Ini Beck, Jeffrey, , ,	itial) or Full C	Orga	nization Name		Date of	f Re	eceint			
	lailing Address 35 W Hampton Rd					M M		D . C) / Y	Y Y	Y
	ity	State		Zip Code		06		09	A 4 0 7 7 A	2017	
	Philadelphia	PA		19118-3610						B9F16F84 his Period	14FEA30
	FEC ID number of contributing federal political committee.									76.9	92
N	ame of Employer (for Individual)	Occ	cupa	tion (for Individual)		M	emo	ttem			
_	elective Insurance Company of America	SV	P, G	ovt & Regulatory Af							
F	eceipt For: Primary General	Aggregate	e Yea	ar-to-Date 🔻							
	Other (specify) V		-7	923.04							
	ull Name of Individual (Last, First, Middle Ini	itial) or Full C	Orga	nization Name		Data					
	B. Beck, Jeffrey, , , Mailing Address 35 W Hampton Rd				_	Date of	r Re	ceipt		YY	Y
_						06	ľ	23		2017	
	ity	State		Zip Code						0CE43C44	4FD4AE
	Philadelphia	PA	_	19118-3610	_	Amount	t of	Each F	leceipt th	nis Period	
	EC ID number of contributing ederal political committee.	С	_			Ľ				76.9	92
S	lame of Employer (for Individual) elective Insurance Company of America			tion (for Individual) Govt & Regulatory Af		M	emo	o Item			
F	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻							
	Other (specify)		,	999.96							
	ull Name of Individual (Last, First, Middle Ini Bennett, Cyndi, , ,	tial) or Full C	Orga	nization Name		Date of	f Re	eceipt			
Ν	lailing Address 10 Landrud Rd					05	/	26) / Y	2017	Y
	ity	State		Zip Code		Trans	act	ion ID :	A6AA20	CB6F3B	A4517A6
	Sussex	NJ	_	07461-4003	_	Amount	t of	Each R	leceipt th	nis Period	
	EC ID number of contributing ederal political committee.	С				<u> </u>	_	y		20.0	00
S	ame of Employer (for Individual) selective Insurance Company of America		•	tion (for Individual) mpensation & Benefi		M	emo	o Item			
F	eceipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 220.00							
	BTOTAL of Receipts This Page (optional)				• -			, , , ,	, ,	173.8	34

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the	(check only one)			
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			person for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Selective Insurance Compan	y of America	a Political Action Com	nittee			
Full Name of Individual (Last, First, Middle Bennett, Cyndi, , ,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 10 Landrud Rd			M M / D D / Y Y Y Y Y 06 09 2017			
City	State NJ	Zip Code	Transaction ID : A0FB3D67AFF0B41E184			
Sussex	INJ	07461-4003	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		20.00			
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item			
Selective Insurance Company of America	VP,	Compensation & Benefi				
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General			1			
Other (specify) ▼		240.00	1			
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name				
B. Bennett, Cyndi, , ,			Date of Receipt			
Mailing Address 10 Landrud Rd			06 / D D / Y Y Y Y 2017			
City	State	Zip Code	Transaction ID : A896424DF834E408DB7D			
Sussex	NJ	07461-4003	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		20.00			
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Compensation & Benefi	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General			1			
Other (specify) V		, 260.00				
Full Name of Individual (Last, First, Middle C. Chakravarthi, Sarita, , ,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 648 S Brooksvale Rd			04 28 2017			
City	State	Zip Code	Transaction ID : A5AF9211DABFD4CE2A9			
Cheshire	СТ	06410-3517	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		23.08			
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item			
Selective Insurance Company of America		, Tax & Asst Treasurer				
Receipt For:	Aggregate	Year-to-Date V				
Primary General		007 70	1			
Other (specify)		207.72				
SUBTOTAL of Receipts This Page (optiona	I)		63.08			
TOTAL This Period (last page this line num	ber only)					

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions				
Selective Insurance Company	of America	a Political Action Com	nittee				
Full Name of Individual (Last, First, Middle In Chakravarthi, Sarita, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 648 S Brooksvale Rd			05 12 2017				
City Cheshire	State CT	Zip Code 06410-3517	Transaction ID : A6250C08884F44F439A4 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		23.08				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Tax & Asst Treasurer	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.80]				
Full Name of Individual (Last, First, Middle In B. Chakravarthi, Sarita, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 648 S Brooksvale Rd			05 26 / Y Y Y Y 05 27 2017				
City Cheshire	State CT	Zip Code 06410-3517	Transaction ID : AA230910BF6734412B1 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		23.08				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Tax & Asst Treasurer	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 253.88]				
Full Name of Individual (Last, First, Middle In C. Chakravarthi, Sarita, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 648 S Brooksvale Rd			06 09 2017				
City Cheshire	State CT	Zip Code 06410-3517	Transaction ID : A69FB4987E62E4CE6BI Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		23.08				
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) , Tax & Asst Treasurer	Memo Item				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.96]				
SUBTOTAL of Receipts This Page (optional)			69.24				
TOTAL This Period (last page this line numbe	r only)						

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PAGE 18 OF

ITEMIZED RECEIPTS	for ea	ach category of the led Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be name and address of	e sold or used by any p of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Selective Insurance Company of	America Polit	tical Action Com	nittee
Full Name of Individual (Last, First, Middle Initial Chakravarthi, Sarita, , , Mailing Address 648 S Brooksvale Rd City Cheshire FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State Zip CT 06	Code 6410-3517 (for Individual) Asst Treasurer Date ▼ 300.04	Date of Receipt
Full Name of Individual (Last, First, Middle Initial B. Clark, Thomas, , , Mailing Address 8904 Rams Crossing Ct # C City North Chesterfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	State Zip 23	Code 3236-1388 (for Individual) s General Couns	Date of Receipt
Full Name of Individual (Last, First, Middle Initia C. Clark, Thomas, , , Mailing Address 8904 Rams Crossing Ct # C City North Chesterfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	State Zip 23	Code 236-1388 (for Individual) General Couns	Date of Receipt 03 / 17 / 2017 Transaction ID : A9691F229E70F4ACD8D0 Amount of Each Receipt this Period 50.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			123.08

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
			13 14 15 16 17 berson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Selective Insurance Comp	any of America	a Political Action Com	mittee			
Full Name of Individual (Last, First, M A. Clark, Thomas, , ,		rganization Name	Date of Receipt			
Mailing Address 8904 Rams Crossing # C			03 / D D / Y Y Y Y Y 03 31 2017			
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : A7C9D09B35368402688 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) Selective Insurance Company of Americ		upation (for Individual) 9, Claims General Couns	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]			
Full Name of Individual (Last, First, M B. Clark, Thomas, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 8904 Rams Crossing # C	Ct		04 / 14 2017			
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : AD34D11BDD797469B94 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) Selective Insurance Company of Americ		upation (for Individual) P, Claims General Couns	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00]			
Full Name of Individual (Last, First, M C. Clark, Thomas, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 8904 Rams Crossing # C	Ct		04 / D D / Y Y Y Y 28 2017			
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : AFAE474AFC7EA4C199 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) Selective Insurance Company of Ameri		upation (for Individual) , Claims General Couns	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00]			
SUBTOTAL of Receipts This Page (opti	onal)		150.00			
TOTAL This Period (last page this line i	number only)					

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
Selective Insurance Company	of Americ	a Political Action Com	nittee				
Full Name of Individual (Last, First, Middle Clark, Thomas, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 8904 Rams Crossing Ct # C			05 / D D / Y Y Y Y 2017				
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : A6DA4013106C24E009 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) Selective Insurance Company of America							
Receipt For: Primary General Other (apocify)	Aggregate	Year-to-Date ▼ 500.00	1				
Other (specify) v		-ga	1				
Full Name of Individual (Last, First, Middle B. Clark, Thomas, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 8904 Rams Crossing Ct # C	1.0.1		05 / D D / Y Y Y Y 26 2017				
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : AC08C316D018142EB9 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Claims General Couns	Memo Item				
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		550.00]				
Full Name of Individual (Last, First, Middle Clark, Thomas, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 8904 Rams Crossing Ct # C	1-		06 / D D / Y Y Y Y 2017				
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : A9DAC363E7ED24BA9 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Claims General Couns	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00]				
SUBTOTAL of Receipts This Page (optional).			150.00				
TOTAL This Period (last page this line number	er only)						

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) Selective Insurance Company	of Americ	a Political Action Com	mittee				
Full Name of Individual (Last, First, Middle Ir A. Clark, Thomas, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 8904 Rams Crossing Ct # C			06 / Y Y Y Y Y 23 2017				
City North Chesterfield	State VA	Zip Code 23236-1388	Transaction ID : A87723BEAAA874CD4E Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Claims General Couns	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00]				
Full Name of Individual (Last, First, Middle Ir B. Crosta, Stephen, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 54 Lee Rd			03 17 2017				
City Livingston	State NJ	Zip Code 07039-4134	Transaction ID : ACDF868E4BDB5430CE Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Assistant General Cou	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76]				
Full Name of Individual (Last, First, Middle Ir c. Crosta, Stephen, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 54 Lee Rd			03 31 2017				
City Livingston	State NJ	Zip Code 07039-4134	Transaction ID : ACBA4A56F45AC499C9 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Assistant General Cou	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 269.22]				
SUBTOTAL of Receipts This Page (optional)			126.92				
TOTAL This Period (last page this line number	r only)						

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and s or for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) Selective Insurance Company	of America	a Political Action Comr	nittee				
Full Name of Individual (Last, First, Middle In Crosta, Stephen, , ,	itial) or Full O	rganization Name	Date of Receipt				
Mailing Address 54 Lee Rd			04 14 2017				
City Livingston	State NJ	Zip Code 07039-4134	Transaction ID : ABB850CC739AC4C4F99 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	VP,	upation (for Individual) Assistant General Cou	Memo Item				
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.68]				
Full Name of Individual (Last, First, Middle In B. Crosta, Stephen, , ,	itial) or Full O	rganization Name	Date of Receipt				
Mailing Address 54 Lee Rd			04 28 2017				
City Livingston	State NJ	Zip Code 07039-4134	Transaction ID : A48753C4F56F249608CC Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Assistant General Cou	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14]				
Full Name of Individual (Last, First, Middle In c. Crosta, Stephen, , ,	itial) or Full O	rganization Name	Date of Receipt				
Mailing Address 54 Lee Rd			05 12 2017				
City Livingston	State NJ	Zip Code 07039-4134	Transaction ID : A6D66D7364D124BCEA1 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	VP,	upation (for Individual) Assistant General Cou	Memo Item				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60]				
SUBTOTAL of Receipts This Page (optional)			115.38				
TOTAL This Period (last page this line number	only)						

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		Use separate schedule(s) for each category of the	(check only one)			
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Selective Insurance Company	he name and a	ddress of any political committe	e to solicit contributions from such committee.			
Full Name of Individual (Last, First, Middle I Crosta, Stephen, , , Mailing Address 54 Lee Rd City Livingston	nitial) or Full C State NJ	Zip Code 07039-4134	Date of Receipt			
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	VP,	upation (for Individual) Assistant General Cou Year-to-Date ▼ 423.06	38.46			
Full Name of Individual (Last, First, Middle I B. Crosta, Stephen, , , Mailing Address 54 Lee Rd City Livingston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State NJ C Occ VP,	Zip Code 07039-4134 upation (for Individual) Assistant General Cou Year-to-Date ▼ 461,52	Date of Receipt			
Full Name of Individual (Last, First, Middle I Crosta, Stephen, , , Mailing Address 54 Lee Rd City Livingston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	State NJ C Occo VP,	Zip Code 07039-4134 Upation (for Individual) Assistant General Cou Year-to-Date ▼ 499.98	Date of Receipt 06 23 2017 Transaction ID : A49C55DC07A89462A971 Amount of Each Receipt this Period 38.46 Memo Item			
SUBTOTAL of Receipts This Page (optional)			115.38			

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
Selective Insurance Company	of America	a Political Action Com	mittee				
Full Name of Individual (Last, First, Middle I A. Eppers, Joseph, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 31 Russett Rd			M M / D D / Y Y Y Y Y 05 26 2017				
City Sandy Hook	State CT	Zip Code 06482-1432	Transaction ID : A2FB82766A7D44DEF96/ Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		19.23				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) of Investment Officer	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53]				
Full Name of Individual (Last, First, Middle I B. Eppers, Joseph, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 31 Russett Rd			06 09 / Y Y Y Y 2017				
City Sandy Hook	State CT	Zip Code 06482-1432	Transaction ID : A29291939B85244979E8				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) ef Investment Officer	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76]				
Full Name of Individual (Last, First, Middle I C. Eppers, Joseph, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 31 Russett Rd			06 / Y Y Y Y 06 23 2017				
City _Sandy Hook	State CT	Zip Code 06482-1432	Transaction ID : A5EB398E33BC3480491E Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		19.23				
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) If Investment Officer	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 249.99]				
SUBTOTAL of Receipts This Page (optional)			57.69				
TOTAL This Period (last page this line numbe	er only)						

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			person for the purpose of soliciting contributions te to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Selective Insurance Compa	ny of America	a Political Action Com	mittee			
Full Name of Individual (Last, First, Midd Gaudet, Gordon, , ,	lle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 32 Island Trl			03 01 Y Y Y Y 2017			
City Sparta	State NJ	Zip Code 07871-1602	Transaction ID : A9562EBA260B442B7BA3			
FEC ID number of contributing federal political committee.	C		2500.00			
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Information Of	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]			
Full Name of Individual (Last, First, Midd B. Hall, Brenda, , ,	lle Initial) or Full O	rganization Name	Date of Dessist			
Mailing Address 3407 Delamere Dr			Date of Receipt			
City	State	Zip Code	Transaction ID : ABE3A8D02C90340D29FA			
Matthews	NC	28104-6866	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		100.00			
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P,Chief Strat Ops Offic	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		300.00]			
Full Name of Individual (Last, First, Midd C. Hall, Brenda, , ,	lle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 3407 Delamere Dr			02 / 17 / Y Y Y Y 02 17 2017			
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : A96D989CD403349E6B0D Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) ,Chief Strat Ops Offic	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]			
SUBTOTAL of Receipts This Page (option	al)		2700.00			
TOTAL This Period (last page this line nur	mber only)					

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II LIVIIZED KEGEIF13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	the name and a	ddress of any political committee	person for the purpose of soliciting contributions to solicit contributions from such committee.								
/											
Full Name of Individual (Last, First, Middle A. Hall, Brenda, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3407 Delamere Dr			03 03 2017								
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : AD4A26B44565440ACBE Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		100.00								
Name of Employer (for Individual) Selective Insurance Company of America	SVF	upation (for Individual) P,Chief Strat Ops Offic	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]								
Full Name of Individual (Last, First, Middle B. Hall, Brenda, , ,	Data of Respiret										
Mailing Address 3407 Delamere Dr			Date of Receipt 03 17 2017								
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : A999B4A0CFE6F4C94AB								
FEC ID number of contributing federal political committee.	С	2010+0000	Amount of Each Receipt this Period								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P,Chief Strat Ops Offic	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00]								
Full Name of Individual (Last, First, Middle C. Hall, Brenda, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Brenda										
Mailing Address 3407 Delamere Dr			03 / D D / Y Y Y Y Y 2017								
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : AD520D90EEE7E47C98B Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Chief Strat Ops Offic	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00]								
SUBTOTAL of Receipts This Page (optional)			300.00								
TOTAL This Period (last page this line numb	per only)										

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹							
Any information copied from such Reports and a or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
Selective Insurance Company	of Americ	a Political Action Comr	nittee							
Full Name of Individual (Last, First, Middle Ir A. Hall, Brenda, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Brenda, , ,									
Mailing Address 3407 Delamere Dr			04 14 2017							
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : A3B297BA3C702404780 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	SVF	upation (for Individual) P,Chief Strat Ops Offic Year-to-Date ▼ 800.00	Memo Item							
Full Name of Individual (Last, First, Middle Ir	hitial) or Full C	organization Name								
B. Hall, Brenda, , , Mailing Address 3407 Delamere Dr			Date of Receipt							
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : A3B248AE93B034120878 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P,Chief Strat Ops Offic	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00								
Full Name of Individual (Last, First, Middle Ir c. Hall, Brenda, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 3407 Delamere Dr										
City Matthews	State NC	Zip Code 28104-6866	Transaction ID : A1820A542FBCD4A1FE Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P,Chief Strat Ops Offic	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]							
SUBTOTAL of Receipts This Page (optional)			300.00							
TOTAL This Period (last page this line number	r only)									

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PAGE 28 OF

ITE	MIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)						
			Detailed Summary Page	13 14 15 16						
	information copied from such Reports and Sta r commercial purposes, other than using the n AME OF COMMITTEE (In Full) Selective Insurance Company of	ame and a	ddress of any political committee							
A.	ull Name of Individual (Last, First, Middle Initia Hall, Brenda, , , ailing Address 3407 Delamere Dr	l) or Full O	rganization Name	Date of Receipt						
Ci N	ity latthews	State NC	Zip Code 28104-6866	Transaction ID : A4EF64C4C9CE94283/ Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	С		100.00						
Se	ame of Employer (for Individual) elective Insurance Company of America eceipt For: Primary General Other (specify) ▼	SVP	upation (for Individual) P,Chief Strat Ops Offic Year-to-Date ▼ 1100.00	Memo Item						
B⊦	ull Name of Individual (Last, First, Middle Initia Hall, Brenda, , , ailing Address 3407 Delamere Dr	l) or Full O	rganization Name	Date of Receipt						
Ci M FE		State NC	Zip Code 28104-6866	06 09 2017 Transaction ID : A302640231E664360E Amount of Each Receipt this Period 100.00						
	ame of Employer (for Individual) elective Insurance Company of America		upation (for Individual) P,Chief Strat Ops Offic	Memo Item						
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00							
с. <u></u>	ull Name of Individual (Last, First, Middle Initia Hall, Brenda, , ,	l) or Full O	rganization Name	Date of Receipt						
Ci	ailing Address 3407 Delamere Dr	State	Zip Code	06 23 2017 Transaction ID : ACAA648993D5C4C1F						
	latthews	NC	28104-6866	Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	С		100.00						
S	ame of Employer (for Individual) elective Insurance Company of America eceipt For:	SVP	upation (for Individual) ,Chief Strat Ops Offic	Memo Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1300.00							
SUE	STOTAL of Receipts This Page (optional)			300.00						
тот	AL This Period (last page this line number on	ıly)								

SCHEDULE A (FEC Form 3X) DEOEIDTO

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	▲ 11a 11b 11c 12 13 14 15 16 1 ¹							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
Selective Insurance Company	y of Americ	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middle A. Harris, Christie, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harris, Christie, , ,									
Mailing Address 124 Turkey Hunt Ct			04 28 2017							
City Waxhaw	State NC	Zip Code 28173-6827	Transaction ID : A21A9556223344ABD9							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	1							
Full Name of Individual (Last, First, Middle B. Harris, Christie, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harris, Christie, , ,									
Mailing Address 124 Turkey Hunt Ct	05 / Y Y Y Y 05 12 2017									
City Waxhaw	State NC	Zip Code 28173-6827	Transaction ID : A89A93D8B6224466884 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		250.00	1							
Full Name of Individual (Last, First, Middle C. Harris, Christie, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 124 Turkey Hunt Ct	M M / D D / Y Y Y Y 05 26 2017									
City Waxhaw	State NC	Zip Code 28173-6827	Transaction ID : A702E2580264445EF9B Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	1							
SUBTOTAL of Receipts This Page (optional)			75.00							
TOTAL This Period (last page this line numb	per only)									

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Selective Insurance Company	of Americ	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middle A. Harris, Christie, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harris, Christie, , ,									
Mailing Address 124 Turkey Hunt Ct			M M / D D / Y Y Y Y Y 06 09 2017							
City Waxhaw	State NC	Zip Code 28173-6827	Transaction ID : A0AC8A0E638EB4361901 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	1							
Full Name of Individual (Last, First, Middle B. Harris, Christie , , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harris Christie									
Mailing Address 124 Turkey Hunt Ct			Date of Receipt							
City Waxhaw	State NC	Zip Code 28173-6827	Transaction ID : A779235B59F5741EEA66 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00]							
Full Name of Individual (Last, First, Middle C. Kamrowski, Jeffrey, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 40 Wantage Ave										
City Branchville	State NJ	Zip Code 07890-0001	Transaction ID : A0FEA805D9A30468DBF Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		1000.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Music	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	1							
SUBTOTAL of Receipts This Page (optional).			1050.00							
TOTAL This Period (last page this line number	er only)									

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1							
				person for the purpose of soliciting contributions for solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
	Selective Insurance Company of	nittee									
Α.	Full Name of Individual (Last, First, Middle In Kikkert, Bonnie, , ,	Date of Receipt									
	Mailing Address 18 Martingale Dr			04 28 2017							
	City Sussex	State NJ	Zip Code 07461-2859	Transaction ID : A852C28D83FE449F18 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		20.00							
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims Operations & A	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 215.00	3							
в.	Full Name of Individual (Last, First, Middle In Kikkert, Bonnie, , ,	Date of Receipt									
	Mailing Address 18 Martingale Dr			05 12 / Y Y Y Y 05 12 2017							
	City	State	Zip Code	Transaction ID : A95B160A0EC3A4A55							
	Sussex	NJ	07461-2859	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		20.00							
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims Operations & A	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		235.00]							
C.	Full Name of Individual (Last, First, Middle In Kikkert, Bonnie, , ,	itial) or Full O	organization Name	Date of Receipt							
	Mailing Address 18 Martingale Dr			05 / D D / Y Y Y Y 26 / 2017							
	City Sussex	State NJ	Zip Code 07461-2859	Transaction ID : ADD0C956641B04241							
	FEC ID number of contributing federal political committee.	С		20.00							
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims Operations & A	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 255.00]							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			► 60.00							

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		Use separate schedule(s)	(check only one)						
IILIVIIZED KEGEIF13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Selective Insurance Company	of America	a Political Action Com	mittee						
Full Name of Individual (Last, First, Middle Kikkert, Bonnie, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kikkert, Bonnie, , ,								
Mailing Address 18 Martingale Dr	Mailing Address 18 Martingale Dr								
City Sussex	State NJ	Zip Code 07461-2859	Transaction ID : A0203151DC3D340FD88E Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		20.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims Operations & A	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00]						
Full Name of Individual (Last, First, Middle B. Kikkert, Bonnie, , ,	Initial) or Full O	rganization Name	Date of Perceint						
Mailing Address 18 Martingale Dr			Date of Receipt						
City Sussex	State NJ	Zip Code 07461-2859	Transaction ID : A63A06F0208D04EA6A26 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims Operations & A	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 295.00]						
Full Name of Individual (Last, First, Middle Lanza, Michael, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 84 Sparta Ave Apt 301			02 03 2017						
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : A40141C5EE81A4A68A27 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, General Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00]						
SUBTOTAL of Receipts This Page (optional).			140.00						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Selective Insurance Company	of Americ	a Political Action Com	nittee						
Full Name of Individual (Last, First, Middle Ir Lanza, Michael, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lanza, Michael, , ,								
Mailing Address 84 Sparta Ave Apt 301			02 17 Y Y Y Y 02 17 2017						
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : ABF29BB1105594431B Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 2, General Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00]						
Full Name of Individual (Last, First, Middle Ir B. Lanza, Michael, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name								
Mailing Address 84 Sparta Ave Apt 301	Otata	7	03 / D D / Y Y Y Y Y 2017						
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : A1A11FA10D3E148AA9 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, General Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		500.00]						
Full Name of Individual (Last, First, Middle Ir Lanza, Michael, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Apt 301									
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : ACCA259B5E6BC4A85 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, General Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00]						
SUBTOTAL of Receipts This Page (optional)			300.00						
TOTAL This Period (last page this line number	r only)								

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PAGE 34 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Selective Insurance Company of Full Name of Individual (Last, First, Middle In	e name and a	a Political Action Com	e to solicit contributions from such committee.						
A. Lanza, Michael, , , Mailing Address 84 Sparta Ave Apt 301 City Sparta FEC ID number of contributing	State NJ	Zip Code 07871-6704	Date of Receipt 03 ' 31 ' 2017 Transaction ID : ABAFC03E20A694E65A5 Amount of Each Receipt this Period 100.00						
federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	Occu	upation (for Individual) 2, General Counsel Year-to-Date ▼ 700.00	Memo Item						
Full Name of Individual (Last, First, Middle In B. Lanza, Michael, , , Mailing Address 84 Sparta Ave Apt 301 City Sparta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State NJ C Occ EVF	rganization Name Zip Code 07871-6704 upation (for Individual) P, General Counsel Year-to-Date ▼ 800.00	Date of Receipt						
Full Name of Individual (Last, First, Middle In C. Lanza, Michael, , , Mailing Address 84 Sparta Ave Apt 301 City Sparta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	State NJ C	rganization Name Zip Code 07871-6704 upation (for Individual) , General Counsel Year-to-Date ▼ 900.00	Date of Receipt 04 28 2017 Transaction ID : A5341DE4679BE4190975 Amount of Each Receipt this Period 100.00 Memo Item						
SUBTOTAL of Receipts This Page (optional)			300.00						

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the	(check only one)							
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
angle Selective Insurance Compar	ny of America	a Political Action Com	mittee							
Full Name of Individual (Last, First, Middl A. Lanza, Michael, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lanza, Michael, , ,									
Mailing Address 84 Sparta Ave Apt 301			M M / D / Y							
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : A73FB7843864040408B8 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, General Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]							
Full Name of Individual (Last, First, Middl	e Initial) or Full C	Prganization Name								
B. Lanza, Michael, , , Mailing Address 84 Sparta Ave Apt 301			Date of Receipt							
City	State	Zip Code	Transaction ID : A35D4D83B05804FC1B17							
Sparta	NJ	07871-6704	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, General Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	1							
			-							
Full Name of Individual (Last, First, Middl C. Lanza, Michael, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 84 Sparta Ave Apt 301	Otata	7.0.4	06 / D D / Y Y Y Y 06 09 2017							
City Sparta	State NJ	Zip Code 07871-6704	Transaction ID : AFBEC3BF010A947D1AF Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, General Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1200.00]							
SUBTOTAL of Receipts This Page (optiona	l)		300.00							
TOTAL This Period (last page this line num	ber only)									

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ıт.			Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the p		oose of	soliciting	g contribu	tions		
\backslash	NAME OF COMMITTEE (In Full)	Amoria	- Delitical Action Com	nitta	•							
	Selective Insurance Company of	America	a Political Action Comr	nille	e							
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lanza, Michael, , ,					Date of Receipt						
	Mailing Address 84 Sparta Ave Apt 301				06 23 2017							
	City Sparta	State NJ	Zip Code 07871-6704		Transaction ID : A7A7F17BEA5CB4CBCB Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С							100.	00		
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, General Counsel		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00									
_	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name					D						
в.	Lykins, Deana, , , Mailing Address 121 Wintermute Rd					Re	ceipt 31	/ Y	2017	Y		
	City Newton	State NJ	Zip Code 07860-5411	Transaction ID : AA0313F8CC2 Amount of Each Receipt this Peri						4773B6B		
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri				50.00						
	Name of Employer (for Individual) Selective Insurance Company of America	upation (for Individual) Asst. General Counsel		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00									
С.	Full Name of Individual (Last, First, Middle Initi Lykins, Deana, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 121 Wintermute Rd			04	/	D D 14	/ Y	ү ү 2017	Y			
	City Newton	State NJ	Zip Code 07860-5411						F52F2F24 nis Period	1662863		
	FEC ID number of contributing federal political committee.	С					y .	, , , , , , , , , , , , , , , , , , ,	50.	00		
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Asst. General Counsel		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00									
s	UBTOTAL of Receipts This Page (optional)			.			, , , , , , , , , , , , , , , , , , ,		200.0	00		
т	OTAL This Period (last page this line number o	nly)	•••••	-			, .	-				

FOR LINE NUMBER:

PAGE 37 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED REGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) Selective Insurance Compa	any of America	a Political Action Com	nittee						
Full Name of Individual (Last, First, Mic Lykins, Deana, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 121 Wintermute Rd			04 28 2017						
City Newton	State NJ	Zip Code 07860-5411	Transaction ID : A5FEA27BAA7094619BF Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	a VP,	upation (for Individual) Asst. General Counsel Year-to-Date ▼	Memo Item						
Primary General Other (specify) ▼		350.00]						
Full Name of Individual (Last, First, Mic B. Lykins, Deana, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 121 Wintermute Rd			05 / D / Y Y Y Y 2017						
City Newton	State NJ	Zip Code 07860-5411	Transaction ID : A0C59A50885F84FD4A23 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Asst. General Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00]						
Full Name of Individual (Last, First, Mic C. Lykins, Deana, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 121 Wintermute Rd			05 / 26 / Y Y Y Y						
City Newton	State NJ	Zip Code 07860-5411	Transaction ID : A84F12AB117344840AF4 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		50.00						
Name of Employer (for Individual) Selective Insurance Company of Americ		upation (for Individual) Asst. General Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00]						
SUBTOTAL of Receipts This Page (optio	nal))	150.00						
TOTAL This Period (last page this line n	umber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
				person for the purpose of soliciting contributions tee to solicit contributions from such committee.						
\backslash	NAME OF COMMITTEE (In Full)									
$\Big\rangle$	Selective Insurance Company of	of America	a Political Action Cor	nmittee						
Α.	Full Name of Individual (Last, First, Middle Init Lykins, Deana, , ,	tial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 121 Wintermute Rd			06 09 / Y Y Y Y Y 2017						
	City	State	Zip Code	Transaction ID : A19835061CF664FF7B3						
	Newton	NJ	07860-5411	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Asst. General Counsel	Memo Item						
	Receipt For:									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00							
	Full Name of Individual (Last, First, Middle Init Lykins, Deana, , ,	tial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 121 Wintermute Rd			06 23 2017						
	City	State	Zip Code	Transaction ID : A6F8AB00E08B6419EB						
	Newton	NJ	07860-5411	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Asst. General Counsel	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00							
	Full Name of Individual (Last, First, Middle Init Mazzarella, Michael, , ,	tial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 11 Ski Hill Dr			03 31 2017						
	City	State	Zip Code	Transaction ID : AF5D85C85260F426EAI						
	Bedminster	NJ	07921-2530	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	Selective Insurance Company of America Receipt For:	VP,	Commercial Lines U/W							
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		210.00							
s	UBTOTAL of Receipts This Page (optional)			130.00						
Т	OTAL This Period (last page this line number	only)		•						

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			Person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Selective Insurance Compa	ny of America	a Political Action Com	nittee						
Full Name of Individual (Last, First, Mide Mazzarella, Michael, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11 Ski Hill Dr			M M / D D / Y Y Y Y Y 04 14 2017						
City Bedminster	State NJ	Zip Code 07921-2530	Transaction ID : A548824315E18482FB71 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Commercial Lines U/W	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	1						
Full Name of Individual (Last, First, Mido B. Mazzarella, Michael, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11 Ski Hill Dr			04 28 2017						
City Bedminster	State NJ	Zip Code 07921-2530	Transaction ID : A37EE215121E041F4B6E Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Commercial Lines U/W	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]						
Full Name of Individual (Last, First, Mido C. Mazzarella, Michael, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11 Ski Hill Dr			05 12 Y Y Y Y 05 12 2017						
City Bedminster	State NJ	Zip Code 07921-2530	Transaction ID : AB6497957CF6C40D8929 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Commercial Lines U/W	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00]						
SUBTOTAL of Receipts This Page (option	al)		90.00						
TOTAL This Period (last page this line nu	mber only)								

FOR LINE NUMBER:

PAGE 40 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Selective Insurance Company c	of America Political Action Comm	nittee
Full Name of Individual (Last, First, Middle Ini Mazzarella, Michael, , , Mailing Address 11 Ski Hill Dr City Bedminster FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 07921-2530 C Occupation (for Individual) VP, Commercial Lines U/W Aggregate Year-to-Date ▼ 330.00	Date of Receipt
Full Name of Individual (Last, First, Middle Ini B. Mazzarella, Michael, , , Mailing Address 11 Ski Hill Dr City Bedminster FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code NJ 07921-2530 C Occupation (for Individual) VP, Commercial Lines U/W Aggregate Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle Ini Mazzarella, Michael, , , Mailing Address 11 Ski Hill Dr City Bedminster FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code NJ 07921-2530 C Occupation (for Individual) VP, Commercial Lines U/W Aggregate Year-to-Date ▼ 390.00 390.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	· · · · ·	90.00

FOR LINE NUMBER:

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ITE	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	
or	y information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) Selective Insurance Company of	name and a	ddress of any political committee	e to solicit contributions from such committee.
<u> </u>	Full Name of Individual (Last, First, Middle Initia Mc Lain, James, , ,			Date of Receipt
	Mailing Address 1402 Venetian Way Dr			02 03 2017
-	City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : AA6938ABE49784320AD Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General	SVP	upation (for Individual) P, Chief Field Ops Offi Year-to-Date ▼ 230.79	Memo Item
	U Other (specify) ▼ Full Name of Individual (Last, First, Middle Initia	I) or Full O		
B.	Mc Lain, James, , , Mailing Address 1402 Venetian Way Dr		Iganization Name	Date of Receipt
	City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : A1B96E7CE2BBE414F9F Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Field Ops Offi	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.72	
	Full Name of Individual (Last, First, Middle Initia Mc Lain, James, , ,	ll) or Full O	rganization Name	Date of Receipt
	Mailing Address 1402 Venetian Way Dr			03 / D D / Y Y Y Y 03 / 03 / 2017
-	City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : A5A14FD822B8B41B6B6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) , Chief Field Ops Offi	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.65	
รเ	JBTOTAL of Receipts This Page (optional)		•	. 230.79
т	OTAL This Period (last page this line number or	1ly)		

FOR LINE NUMBER:

PAGE 42 OF

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports a	ind Statements ma		erson for the purpose of soliciting contributions
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Selective Insurance Compar	ny of Americ	a Political Action Com	mittee
Full Name of Individual (Last, First, Middl A. Mc Lain, James, , ,	le Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 1402 Venetian Way Dr			03 / D D / Y Y Y Y 03 17 2017
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : AAE14442084C945A59C3 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.93
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Field Ops Offi	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.58]
Full Name of Individual (Last, First, Middl	le Initial) or Full C	Organization Name	Data of Descipt
B. Mc Lain, James, , , Mailing Address 1402 Venetian Way Dr			Date of Receipt
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : ABB49960993DD4B98A8C Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.93
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Field Ops Offi	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.51]
Full Name of Individual (Last, First, Middl C. Mc Lain, James, , ,	le Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 1402 Venetian Way Dr			04 / D D / Y Y Y Y 04 14 2017
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : A90400862CE474DD7BCE Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.93
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Field Ops Offi	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 615.44]
SUBTOTAL of Receipts This Page (optiona	al)		230.79
TOTAL This Period (last page this line nun	nber only)		

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the	(check only one)						
		Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions be to solicit contributions from such committee.						
Selective Insurance Compar	ny of America	a Political Action Com	mittee						
Full Name of Individual (Last, First, Midd A. Mc Lain, James, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1402 Venetian Way Dr			04 28 2017						
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : AAA7C250B66CC4351BD Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.93						
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVF	upation (for Individual) P, Chief Field Ops Offi	Memo Item						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.37]						
Full Name of Individual (Last, First, Midd B. Mc Lain, James, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1402 Venetian Way Dr	0	7. 0.4	05 / 12 / Y Y Y 2017						
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : AA336BFDF01A04CF08B ⁴ Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.93						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Field Ops Offi	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.30]						
Full Name of Individual (Last, First, Midd C. Mc Lain, James, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1402 Venetian Way Dr			05 / 26 / Y Y Y Y 2017						
City Waxhaw	State NC	Zip Code 28173-8079	Transaction ID : AE806F845AFFB4694B42 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.93						
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) , Chief Field Ops Offi	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.23	1						
SUBTOTAL of Receipts This Page (optional	al)		230.79						
TOTAL This Period (last page this line num	nber only)								

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and a or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Selective Insurance Company Full Name of Individual (Last, First, Middle In	e name and a of America	a Political Action Com	person for the purpose of soliciting contributions e to solicit contributions from such committee.							
A. Mc Lain, James, , , Mailing Address 1402 Venetian Way Dr City Waxhaw FEC ID number of contributing federal political committee.	State NC	Zip Code 28173-8079	Date of Receipt 06 / 09 / 2017 Transaction ID : AB78C0745AD644285B4 Amount of Each Receipt this Period 76.93							
Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	Aggregate	upation (for Individual) P, Chief Field Ops Offi Year-to-Date ▼ 923.16	Memo Item							
Full Name of Individual (Last, First, Middle In B. <u>Mc Lain, James, , ,</u> <u>Mailing Address</u> 1402 Venetian Way Dr <u>City</u> Waxhaw	State	Zip Code 28173-8079	Date of Receipt							
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	SVF	upation (for Individual) P, Chief Field Ops Offi Year-to-Date ▼ 1000.09	Memo Item							
Full Name of Individual (Last, First, Middle In Murphy, Gregory, E., , Mailing Address 119 Curtis Point Dr City Mantoloking FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General	State NJ C Occu Chai	rganization Name Zip Code 08738-1202 upation (for Individual) irman and CEO Year-to-Date ▼	Date of Receipt							
Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			5153.86							

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ידו			Use separate schedule(s)	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	1a 3		11b 14	11c 15	12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for	the p	ourp	ose of	soliciting	g contribu	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Selective Insurance Company of	America	a Political Action Comr	nittee						
		/		inttoo						
Α.	Full Name of Individual (Last, First, Middle Initia Musilli, Charles, A., , III	al) or Full O	rganization Name	Da	te of	Rec	ceipt			
	Mailing Address 3 Linquenda Dr				м 04	/	D D 26	/ Y	2017	Y
	City Sussex	State NJ	Zip Code 07461-2739						D1F2E56	4B3E902
	FEC ID number of contributing federal political committee.	C			_		,		1000.	00
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief HR Officer		Me	mo	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00							
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name							
В.	Neale, George, , , Mailing Address 7313 Harcourt Xing			М	te of 03	Rec	ceipt	/ Y	2017	Y
	City Fort Mill	State SC	Zip Code 29707-5986	т	ransa		on ID : /		19155914	13D08AC
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period					
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Claims Officer		Ме	mo	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76							
с.	Full Name of Individual (Last, First, Middle Initia Neale, George, , ,	al) or Full O	rganization Name	Da	te of	Rec	ceipt			
	Mailing Address 7313 Harcourt Xing			M	03 ^M	/	31	/ Y	2017	Y
	City Fort Mill	State SC	Zip Code 29707-5986						56C4F54	4A44B1B
	FEC ID number of contributing federal political committee.	С			_		9		38.	46
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Chief Claims Officer		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 269.22							
s	UBTOTAL of Receipts This Page (optional)			. [1076.	92
т	OTAL This Period (last page this line number o	nly)					,			

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions						
Selective Insurance Company	of Americ	a Political Action Com	nittee						
Full Name of Individual (Last, First, Middle Neale, George, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7313 Harcourt Xing			04 / Y Y Y Y 2017						
City Fort Mill	State SC	Zip Code 29707-5986	Transaction ID : A0F90F877D07C41E4B70 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) Selective Insurance Company of America	EVF	upation (for Individual) P, Chief Claims Officer	Memo Item						
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 307.68]						
Full Name of Individual (Last, First, Middle B. Neale, George, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7313 Harcourt Xing			04 28 2017						
City Fort Mill	State SC	Zip Code 29707-5986	Transaction ID : AD7296A8FBF684616862 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Claims Officer	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14]						
Full Name of Individual (Last, First, Middle Neale, George, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7313 Harcourt Xing			05 / D D / Y Y Y Y 2017						
City Fort Mill	State SC	Zip Code 29707-5986	Transaction ID : A0FFBD9FB761543C69B Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	EVF	upation (for Individual) 9, Chief Claims Officer	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	1						
SUBTOTAL of Receipts This Page (optional).			115.38						
TOTAL This Period (last page this line number	er only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Selective Insurance Company	y of America	a Political Action Com	mittee							
 Full Name of Individual (Last, First, Middle A. Neale, George, , , 	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7313 Harcourt Xing			05 26 2017							
City	State	Zip Code	Transaction ID : A43366C52A0CC4C5297C							
Fort Mill	SC	29707-5986	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Selective Insurance Company of America	EVF	P, Chief Claims Officer								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		423.06								
			-							
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	Data of Dassist							
B. Neale, George, , , Mailing Address 7313 Harcourt Xing			Date of Receipt							
Maning Address 7313 Harcourt Xing			06 09 2017							
City	State	Zip Code	Transaction ID : A0406E4DBD42A464DA4I							
Fort Mill	SC	29707-5986	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Chief Claims Officer	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify)		461.52								
Full Name of Individual (Last, First, Middle C. Neale, George, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7313 Harcourt Xing			06 / Y Y Y Y 23 2017							
City Fort Mill	State SC	Zip Code 29707-5986	Transaction ID : A13CE8CCD09A44EE39E							
	30	29707-5960	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
Selective Insurance Company of America Receipt For:	I	, Chief Claims Officer								
Primary General	Aggregate	Year-to-Date ▼								
Other (specify)		499.98								
SUBTOTAL of Receipts This Page (optional))		115.38							
TOTAL This Period (last page this line numb	per only)									

FOR LINE NUMBER:

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		Use separate schedule(s)	(check o	(check only one)						
		for each category of the Detailed Summary Page	X 11a	F	11b 14	11c 15	12 16	17		
Any information copied from such Reports and or for commercial purposes, other than using the			erson for th		rpose of	soliciting	g contribut	ions		
NAME OF COMMITTEE (In Full)										
Selective Insurance Company	of America	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middle I Nenaber, Richard, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 8559 S Myrtle Ave			M 02		/ D D 03	/ Y	2017	Y		
City Tempe	State AZ	Zip Code 85284-2373					4D7055A	4C2896A		
FEC ID number of contributing federal political committee.	С			_	-9	-	100.0	00		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]							
Full Name of Individual (Last, First, Middle I B. Nenaber, Richard, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 8559 S Myrtle Ave			02		/ D D 17	/ Y	2017	Y		
City Tempe	State AZ	Zip Code 85284-2373					CCADBE	D40E886		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music		Mem	o Item					
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		400.00]							
Full Name of Individual (Last, First, Middle I C. Nenaber, Richard, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 8559 S Myrtle Ave			M 03		/ D D 03	/ Y	2017 [°]	Y		
City Tempe	State AZ	Zip Code 85284-2373					20317D44 nis Period	C4BB4D		
FEC ID number of contributing federal political committee.	С		Ē	_	y	y	100.0	00		
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music		Mem	io Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]							
SUBTOTAL of Receipts This Page (optional)					y	. ,	300.0	00		
TOTAL This Period (last page this line numbe	er only)				-	- 45				

FOR LINE NUMBER:

PAGE 49 OF

		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)		····· · ··· · · · · · · · · · · · · ·								
Selective Insurance Company	of Americ	a Political Action Com	mittee							
Full Name of Individual (Last, First, Middle In Nenaber, Richard, , ,	Date of Receipt									
Mailing Address 8559 S Myrtle Ave			03 / D D / Y Y Y Y 17 2017							
City Tempe	State AZ	Zip Code 85284-2373	Transaction ID : AEB87C0CCB5A143F9B Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Music	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	1							
Full Name of Individual (Last, First, Middle In B. Nenaber, Richard, , ,	II Name of Individual (Last, First, Middle Initial) or Full Organization Name									
Mailing Address 8559 S Myrtle Ave			03 31 2017							
City Tempe	State AZ	Zip Code 85284-2373	Transaction ID : AAB2CC1A96DA64FD390 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00]							
Full Name of Individual (Last, First, Middle In C. Nenaber, Richard, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8559 S Myrtle Ave										
City Tempe	State AZ	Zip Code 85284-2373	Transaction ID : A278534B0043A4156B64 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 800.00	1							
SUBTOTAL of Receipts This Page (optional)			300.00							
TOTAL This Period (last page this line numbe	r only)									

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
II LIVIIZED REGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
Selective Insurance Company of	of America	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middle In A. Nenaber, Richard, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8559 S Myrtle Ave			M M / D D / Y Y Y Y 04 28 2017							
City Tempe	State AZ	Zip Code 85284-2373	Transaction ID : AE27059716E404EE8A5 Amount of Each Receipt this Period							
FEC ID number of contributing										
federal political committee.	C		100.00							
Name of Employer (for Individual)		upation (for Individual) P. Music	Memo Item							
Selective Insurance Company of America Receipt For:										
Primary General	Aggregate	Year-to-Date ▼								
Other (specify)	L	900.00	1							
Full Name of Individual (Last, First, Middle In B. Nenaber, Richard, , ,	Date of Receipt									
Mailing Address 8559 S Myrtle Ave			05 12 2017							
City	State	Zip Code	Transaction ID : A4B57DB03F4C8494FB5							
Tempe	AZ	85284-2373	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		1000.00]							
Full Name of Individual (Last, First, Middle In C. Nenaber, Richard, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8559 S Myrtle Ave			05 26 2017							
City	State	Zip Code	Transaction ID : A87ACB84191284BBD9							
Tempe	AZ	85284-2373	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) , Music	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify)		1100.00]							
SUBTOTAL of Receipts This Page (optional)			300.00							
TOTAL This Period (last page this line number	only)									

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1								
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)		_									
Selective Insurance Company	of America	a Political Action Com	nittee								
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8559 S Myrtle Ave			06 09 2017								
City	State AZ	Zip Code 85284-2373	Transaction ID : A7479FB1F5109447A								
Tempe		03204-2373	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		100.00								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		1200.00	1								
		Apr Apr An	-								
Full Name of Individual (Last, First, Middle I B. Nenaber, Richard, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name										
Mailing Address 8559 S Myrtle Ave			Date of Receipt								
City	State	Zip Code	Transaction ID : A282A386F1E0041EE9								
Tempe	AZ	85284-2373	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		100.00								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Music	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		1300.00]								
Full Name of Individual (Last, First, Middle I C. O'Brien, William, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 12009 Carolina Cherry Ln			04 28 2017								
City	State	Zip Code	Transaction ID : AC257DAFB8C014A3								
Waxhaw	NC	28173-6214	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		23.08								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		207.72]								
SUBTOTAL of Receipts This Page (optional)	<u> </u>		223.08								
TOTAL This Period (last page this line numbe											

FOR LINE NUMBER:

PAGE 52 OF

ITEMIZED R			Use separate schedule(s)	(check only one)											
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	17					
			l ay not be sold or used by any p ddress of any political committe	erson foi	the p	ourpo	ose of :	soliciting	contribut	tions					
	MMITTEE (In Full)														
	. ,	of America	a Political Action Com	nittee											
A. O'Brien, Willi	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name O'Brien, William, , ,						Date of Receipt								
	Mailing Address 12009 Carolina Cherry Ln						M M / D D / Y Y Y Y 05 12 2017								
City Waxhaw		State NC	Zip Code 28173-6214						F04B654	94B8D5					
FEC ID number federal political	5	С			_		p. I		23.0)8					
Selective Insura	oyer (for Individual) ance Company of America	upation (for Individual) Claims LOB		Me	mo	Item									
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate	Year-to-Date ▼ 230.80]											
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name O'Brien, William, , ,						eipt								
Mailing Address	Mailing Address 12009 Carolina Cherry Ln					1	D D D 26	/ Y	ү ү 2017	Y					
City Waxhaw		State NC	Zip Code 28173-6214						051BEFB is Period	4C2386D					
FEC ID number federal political	5	C							23.0	38					
	oyer (for Individual) Ince Company of America	upation (for Individual) Claims LOB		Me	mo	Item									
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate	Year-to-Date ▼ 253.88	1											
	Other (specify) ▼ 253.88 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name														
c. O'Brien, W				Da	ate of	Rec	eipt								
	5 12009 Carolina Cherry Ln	Otata	7.0.4	- L	06	/	09	L	2017						
City Waxhaw		State NC	Zip Code 28173-6214						BD3CD3	345F8A3					
FEC ID number federal political	5	С			_	,		, ,	23.0	28					
Selective Insura	oyer (for Individual) ance Company of America		upation (for Individual) Claims LOB		Me	emo	ltem								
Receipt For: Primary Other (sp	General General	Aggregate	Year-to-Date ▼ 276.96]											
SUBTOTAL of Re	eceipts This Page (optional)					,		.,	69.2	24					
TOTAL This Period	od (last page this line numbe	r only)													

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
IIEWIZED REGEIFIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Selective Insurance Compar	ny of America	a Political Action Com	nittee							
Full Name of Individual (Last, First, Middl A. O'Brien, William, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 12009 Carolina Cherry Lr	1		M M / D D / Y Y Y Y Y 06 23 2017							
City Waxhaw	State NC	Zip Code 28173-6214	Transaction ID : ADC9AF64830C44E66BB Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		23.08							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Claims LOB	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.04]							
Full Name of Individual (Last, First, Middl B. Oosten, Melinda, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name									
Mailing Address 9 Rachel Ln			Date of Receipt							
City Green Twp	State NJ	Zip Code 07821-2059	Transaction ID : AA0B1F296DD37449CB62 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Personal Lines Pricin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00								
Full Name of Individual (Last, First, Middl C. Oosten, Melinda, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9 Rachel Ln			05 12 2017							
City Green Twp	State NJ	Zip Code 07821-2059	Transaction ID : A829B5ED7D0344DE394							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Personal Lines Pricin	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	1							
SUBTOTAL of Receipts This Page (optiona	l)		73.08							
TOTAL This Period (last page this line num	ber only)									

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		Use separate schedule(s)	(check only one)							
ILIVIIZED KEGEIF13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
Selective Insurance Company	of America	a Political Action Com	mittee							
Full Name of Individual (Last, First, Middle A. Oosten, Melinda, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9 Rachel Ln			05 26 / Y Y Y Y 075 26 2017							
City Green Twp	State NJ	Zip Code 07821-2059	Transaction ID : A01D790F72890475ABD3 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Personal Lines Pricin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00]							
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name								
B. Oosten, Melinda, , , Mailing Address 9 Rachel Ln			Date of Receipt							
City Green Twp	State NJ	Zip Code 07821-2059	Transaction ID : A61ED038601C840E89C6 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Personal Lines Pricin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]							
Full Name of Individual (Last, First, Middle C. Oosten, Melinda, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9 Rachel Ln			06 / Y Y Y Y 07 23 2017							
City Green Twp	State NJ	Zip Code 07821-2059	Transaction ID : A3703B5F819CE41EEB33 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) Personal Lines Pricin	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00]							
SUBTOTAL of Receipts This Page (optional).			75.00							
TOTAL This Period (last page this line number	er only)									

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1								
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Selective Insurance Company Full Name of Individual (Last, First, Middle In Orecchio, Maria, , , Mailing Address 54 McKesson Hill Rd	of America	e to solicit contributions from such committee.									
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A5B56B1220B684A08B Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Deputy General Couns	Memo Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.79]								
Full Name of Individual (Last, First, Middle I B. Orecchio, Maria, , , Mailing Address 54 McKesson Hill Rd	nitial) or Full O	rganization Name	Date of Receipt								
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A680020A9538F4CD38EF Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.93								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Deputy General Couns	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.72]								
Full Name of Individual (Last, First, Middle I Orecchio, Maria, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 54 McKesson Hill Rd	State	Zip Code	03 / D D / Y Y Y Y 2017								
City Chappaqua	NY	10514-1631	Transaction ID : A11BE0B7FE02F4E38A Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.93								
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) 9, Deputy General Couns	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.65]								
SUBTOTAL of Receipts This Page (optional)			230.79								
TOTAL This Period (last page this line numbe	r only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) Selective Insurance Company	of Americ	a Political Action Com	nittee						
Full Name of Individual (Last, First, Middle I Orecchio, Maria, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 54 McKesson Hill Rd			M M / D D / Y Y Y Y Y 03 17 2017						
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A6B38C7DE263A4C0F Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.93						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Deputy General Couns	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.58]						
Full Name of Individual (Last, First, Middle I Orecchio, Maria, , ,	Date of Receipt								
Mailing Address 54 McKesson Hill Rd			04 / D D / Y Y Y Y 04 14 2017						
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A4C7DC212DD2246D9/ Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.93						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Deputy General Couns	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.51]						
Full Name of Individual (Last, First, Middle I C. Orecchio, Maria, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 54 McKesson Hill Rd			04 28 2017						
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : AA36FE0C8FF4D4292I Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.93						
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 9, Deputy General Couns	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 615.44]						
SUBTOTAL of Receipts This Page (optional)			230.79						
TOTAL This Period (last page this line numbe	er only)								

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ITE			Use separate schedule(s) for each category of the	(check only one)						
			Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
or	y information copied from such Reports and Sta for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
\rangle	Selective Insurance Company of	f America	a Political Action Com	nittee						
Α.	Full Name of Individual (Last, First, Middle Initi Orecchio, Maria, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 54 McKesson Hill Rd			05 12 2017						
	City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A8589AC7C56634092A30 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.93						
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) 9, Deputy General Couns Year-to-Date ▼	Memo Item						
	Primary General Other (specify) ▼		692.37	1						
	Full Name of Individual (Last, First, Middle Initi Orecchio, Maria, , ,	Date of Receipt								
	Mailing Address 54 McKesson Hill Rd			05 26 2017						
-	City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A7D2B547E10D1462DAA Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.93						
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) 2, Deputy General Couns	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.30							
	Full Name of Individual (Last, First, Middle Initi Orecchio, Maria, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 54 McKesson Hill Rd			M M / D D / Y Y Y Y 06 09 2017						
	City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : AB6F0C06226E94AF8B7 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.93						
	Name of Employer (for Individual) Selective Insurance Company of America Receipt For:	SVP	upation (for Individual) , Deputy General Couns	Memo Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.23]						
S	UBTOTAL of Receipts This Page (optional)			230.79						
т	OTAL This Period (last page this line number o	nly)								

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1								
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions								
Selective Insurance Company	of America	a Political Action Com	nittee								
Full Name of Individual (Last, First, Middle Ir Orecchio, Maria, , ,											
Mailing Address 54 McKesson Hill Rd			06 23 2017								
City Chappaqua	State NY	Zip Code 10514-1631	Transaction ID : A622B5E2326C0458AE Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.93								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Deputy General Couns	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.16]								
Full Name of Individual (Last, First, Middle Ir 3. Purnell, Thomas, Stewart, ,	Date of Receipt										
Mailing Address 4 Country Ln			M M / D D / Y Y Y Y 04 28 2017								
City Sparta	State NJ	Zip Code 07871-2911	Transaction ID : A37AF4ABB8C5F4477B/ Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		25.00								
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) P, Regional Manager	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00]								
Full Name of Individual (Last, First, Middle Ir c. Purnell, Thomas, Stewart, ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4 Country Ln			05 12 2017								
City Sparta	State NJ	Zip Code 07871-2911	Transaction ID : A841DE8044590427E9 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		25.00								
Name of Employer (for Individual) Selective Insurance Company of America Receipt For:		upation (for Individual) , Regional Manager	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]								
SUBTOTAL of Receipts This Page (optional)			126.93								
TOTAL This Period (last page this line number	r only)										

FOR LINE NUMBER:

PAGE 59 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Selective Insurance Company	of Americ	a Political Action Com	nittee
Full Name of Individual (Last, First, Middle Ir Purnell, Thomas, Stewart, , Mailing Address 4 Country Ln City Sparta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State NJ C Occ SVF Aggregate	Zip Code 07871-2911 upation (for Individual) P, Regional Manager Year-to-Date ▼ 275.00	Date of Receipt
Full Name of Individual (Last, First, Middle In B. Purnell, Thomas, Stewart, , Mailing Address 4 Country Ln City Sparta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify) ▼	State NJ C SV	Zip Code 07871-2911 cupation (for Individual) P, Regional Manager Year-to-Date ▼ 300.00	Date of Receipt 06 ' 09 ' 2017 Transaction ID : A489CA31786CF43F5B0B Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Ir Purnell, Thomas, Stewart, , Mailing Address 4 Country Ln City Sparta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Selective Insurance Company of America Receipt For: Primary General Other (specify)	State NJ C Occ SVF	Drganization Name Zip Code 07871-2911 upation (for Individual) P, Regional Manager Year-to-Date ▼ 325.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		· · ·	75.00

FOR LINE NUMBER:

PAGE 60 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck only	or or	ne)						
11			for each category of the Detailed Summary Page	×	11a		11b	11c	12	_			
	y information copied from such Reports and S for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full)			50 10 301			ulions	nom suc					
\rangle	Selective Insurance Company of	of America	a Political Action Com	mittee)								
Α.	Full Name of Individual (Last, First, Middle Ini Sarisky, Brian, C., ,	tial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 22 Natale Dr												
	City Sparta	State NJ	Zip Code 07871-3034	A					F67358C4	AB9807			
	FEC ID number of contributing federal political committee.	С					-		25.0	00			
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) of UW Officer, CL		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00										
B.	Full Name of Individual (Last, First, Middle Ini Sarisky, Brian, C., ,	tial) or Full O	rganization Name		ate of	Re	eceipt						
	Mailing Address 22 Natale Dr			M M / D D / Y									
	City	State NJ	Zip Code						5E8A6234	4C24AF4			
	Sparta FEC ID number of contributing federal political committee.	C	07871-3034	A	mount	of		Receipt tr	nis Period 25.0	00			
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) ef UW Officer, CL		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]									
С.	Full Name of Individual (Last, First, Middle Ini Sarisky, Brian, C., ,	tial) or Full O	rganization Name		ate of	Re	eceipt						
	Mailing Address 22 Natale Dr				^M 05	1	26		2017 [°]	Y			
	City Sparta	State NJ	Zip Code 07871-3034	A	Transaction ID : AB8F380C7760D45E Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			-		y	. ,	25.0	00			
	Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) f UW Officer, CL		Me	emo) Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00										
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			▶ [▶ [9 . 7 .	· · ·	75.0	00			

FOR LINE NUMBER:

PAGE 61 OF

	Use separate schedule(s)		(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)		_						
> Selective Insurance Company	of America	a Political Action Com	nittee					
Full Name of Individual (Last, First, Middle I A. Sarisky, Brian, C., ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 22 Natale Dr			06 09 2017					
City	State NJ	Zip Code 07871-3034	Transaction ID : A9A57CAF80ADC4A679					
Sparta	INJ	07871-3034	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		25.00					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
Selective Insurance Company of America	Chie	ef UW Officer, CL						
Receipt For:	Aggregate	Year-to-Date V						
Other (specify) ▼		300.00	1					
			1					
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name						
B. Sarisky, Brian, C., ,			Date of Receipt					
Mailing Address 22 Natale Dr			06 23 2017					
City	State	Zip Code	Transaction ID : A474FB49F74AE4FDAB					
Sparta	NJ	07871-3034	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		25.00					
Name of Employer (for Individual) Selective Insurance Company of America		upation (for Individual) ef UW Officer, CL	Memo Item					
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify) ▼		325.00]					
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address			M = M / D = D / Y = Y = Y = Y					
City	State	Zip Code						
	_		Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Primary General			1					
Other (specify)		295 I 95 I 465 I	1					
SUBTOTAL of Receipts This Page (optional)			50.00					
TOTAL This Period (last page this line numbe	r only)		18383.58					

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S	CHEDULE B (FEC Form 3X)			FC)R I		NUMBER:			PAGE	62 C	F 70
ITEMIZED DISBURSEMENTS		Use sepa for each		neck	only	y one)						
			Summary Page			21b 28a	22 x 28b	23 28c		L	27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	n for the pur	pose c	of solic	iting o	contribut	
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			-		-						
	Selective Insurance Company of A	America I	-olitical Acti	on C	om	mit	tee					
Α.	Full Name (Last, First, Middle Initial) American Insurance Association F	PAC		Date of Disbursement								
	Mailing Address 2101 L Street N.W. Suite 400											
	City	State DC	Zip Code				FEC Identi	ficatior	n Num	ber		
	Washington Purpose of Disbursement		20037-1542					1024	12			
	Member contribution to PAC						U U	010314		00 475	7005	
	Candidate Name			Cate	aorv	/	Trans Amount of					eriod
	American Insurance Association F				/pe							
		ement For: 2						,	_		5000.0	0
	Senate President	Primary Other (spe	General				-					
	State: District:	Other (sper	Other				Memo	Item				
в.	Full Name (Last, First, Middle Initial) BEATTY FOR CONGRESS Mailing Address PO BOX 172				Date of Di	D			ү ү 2017	Ŷ		
	City	State OH	State Zip Code					ficatior	n Num	ber		
	Columbus								-			
	Purpose of Disbursement Contribution to Beatty for Congress		—		11	C CO	050736	68				
	Candidate Name			Cate	aony	/	Transaction ID : BCA0329DD8 Amount of Each Disbursement this F				Period	
	Beatty, Joyce, B., Rep.,			Category/ Type			Amount of	Laon	Disbui	Serrie		chida
		ement For:	-							<u> </u>	500.0	0
	Senate President	Primary Other (anal	General				_					
_	State: OH District: 03	Other (spe	Other				Memo	Item				
C.	Full Name (Last, First, Middle Initial) Blaine For Congress						Date of Di	sburse	ment			
•	Diame i or Congress						M M /	D	D /	Y	YY	Y
	Mailing Address 3410 Alabama Avenue						01	23	3		2017	
	City Alexandria	State VA	Zip Code 22305-1736				FEC Identi	ficatior	n Num	ber		
	Purpose of Disbursement Various PACs Dinner with Congressman B. Luetke	emeyer			-		U)45867		4000		
	Candidate Name			Cate	gorv	/	Trans Amount of					eriod
	Luetkemeyer, Blaine, , Rep.,			/pe j								
	Office Sought: X House Disburse Senate	2017 General					,		-	1000.0	U	
	President	Primary Other (spe										
	State: MO District: 03		Other				Memo	Item				
⊢	UBTOTAL of Disbursements This Page (optional).					_				r. 1	6500.0	0

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IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cł		only 21b	22 🗶 23 🗌 26 🗌 27							
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\square	NAME OF COMMITTEE (In Full)													
	Selective Insurance Company of A	America	Political Action	on C	om	mitt	ee							
	Full Name (Last, First, Middle Initial)													
А.	Hultgren for Congress		Date of Disbursement											
	Mailing Address 5827 Colfax Avenue						05 / D D / Y Y Y Y 05 / 08 / 2017							
	City	State	Zip Code				FEC Ide	antific	nation	n Ni	umbe	r		
	Alexandria	VA	22311-1013				I LO IU	SITUTIC	Jalion		JUIDE	71	-	
	Purpose of Disbursement AIA, Z-PAC and The Hartford Advocate Lunch for	Hon R Hult	aren		-		С	HOIL	1408	0				
	Candidate Name		gien	<u> </u>		_			tion					
	Hultgren, Randy, M., Rep.,			Cate	egory /pe	//	Amount	of E	ach	Dis	ourse	emen	t this F	'eriod
		ement For:	2017	iy	10								1000.0	0
	Senate	Primary	General					- 7			7			
	President x	Other (spe					Me	mo It	tem					
	State: IL District: 14		Other											
-	Full Name (Last, First, Middle Initial)													
в.	JOSH GOTTHEIMER FOR CONC	GRESS					Date of Disbursement							
	Mailing Address 3701 Porter Street NW	ig Address 3701 Porter Street NW						02 / D D / Y Y Y Y 02 15 2017						
	City	State Zip Code												
	Washington	DC	20016-3103				FEC Identification Number							
	Purpose of Disbursement		С	C005	7394	9								
	Reception in Support of Congressman Josh Gotth	eimer					Transaction ID : BD9AEE7235							
	Candidate Name				Category/		Amount	of E	ach	Dis	ourse	emen	t this F	Period
	Gottheimer, Josh, S., Rep., Office Sought: x House Disburse	ement For:	2017	Туре							-		2500.0	0
	Senate	Primary	General					-7			-	-	2000.0	
	President													
	State: NJ District: 05		Other				Me	mo It	tem					
_	Full Name (Last, First, Middle Initial)													
C.	JOSH GOTTHEIMER FOR CONC	GRESS					Date of	Disb	ourse	mei	nt			
	Mailing Address 3701 Porter Street NW						м м 04	/	D 24		/		017	Y
	Maning Address Storr Steel NW						0.1		-	-			011	
	City	State	Zip Code				FEC Ide	entific	cation	n Ni	umbe	er		
	Washington Purpose of Disbursement	DC	20016-3103					0005						
	Reception in Support of Congressman Josh Gotth	eimer					Ŭ		57394	-				
	Candidate Name	Categ			aon	,/	Tra Amount		tion ach					Period
	Gottheimer, Josh, S., Rep.,				pe			. L	2011	_ 10				5
		ement For:											2500.0	0
	Senate						_							
	State: NJ District: 05	Other (spe					Me	mo It	tem					
	State: NJ District: 05		Other											
5	UBTOTAL of Disbursements This Page (optional).												6000.0	00
Ĕ						-					-7	-		
т	OTAL This Period (last page this line number only	y)								_				

SCHEDULE B (FEC Form 3X)			FO	RL	INE M	NUMBER	:			PAGE	64 O	= 70
ITEMIZED DISBURSEMENTS	Use separation Use separation Use separation use for each		leck	only	/ one)							
		Summary Page			21b 28a	22 28b	-	23 28c	2		27 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)			_									
Selective Insurance Company of	America	Political Action	on Co	om	mitt	ee						
Full Name (Last, First, Middle Initial) A. KEVIN MCCARTHY FOR CONGI					Date o	f Dis	burse		V	YYY		
Mailing Address PO BOX 12667	1					06		0			2017	
City Bakersfield	State CA	Zip Code 93389-2667				FEC lo	lentifi	catior	n Num	ber		
Purpose of Disbursement		93369-2007	_		-	С	C00	42093	35			
American Insurance Association Dinner - K. McCa	arthy						1. All 1.		ID : B	BB30	30031	
Candidate Name			Cate		/						nt this Pe	eriod
McCarthy, Kevin, , Rep.,			Ту	pe							1500.00	
Office Sought: X House Disburs	ement For:	2017 General						<u> </u>		_	1000.00	
President							me '	tor				
State: CA District: 23		Other				IME	emo l	tem				
Full Name (Last, First, Middle Initial) B. TREY FOR CONGRESS								burse	ment			
							M = M / D = D / Y = Y = Y					
Mailing Address PO BOX 421						06 06 2017						
City	State	Zip Code 47131-0421				FEC lo	lentifi	catior	ר Num	ber		
Jeffersonville Purpose of Disbursement	IN			_	C C00590463							
American Insurance Association Dinner - T. Hollir	er - T. Hollingsworth					-	1				7000/	
Candidate Name	Category/					Transaction ID : B2A2C970895 Amount of Each Disbursement this Pe					eriod	
Hollingsworth, Trey, , Rep., III			Туре				-	-				-
	ement For:									_	1500.00	
President X	Primary Other (spe	cify) General				- E						
State: IN District: 09		Other				Me	emo I	tem				
Full Name (Last, First, Middle Initial)						Date o	f Dis	burse	ment			
						M M	/	D	D /	Y	YYY	
Mailing Address								L.		L.		
City	State	Zip Code				FEC lo	lentifi	catior	n Num	oer		
Purpose of Disbursement	Purpose of Disbursement											
Candidate Name	/	Amoun	t of E	Each	Disbur	semer	nt this Po	eriod				
	ement For:		Ту					<u> </u>			1 485	
Senate	Primary	General										
State: District:	Other (spe	city) 🔻				Me	emo l	tem				
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SUBTOTAL of Disbursements This Page (optional)								_			3000.00	כ כ
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SCH	EDULE B (FEC Form 3X)			FC	DR L	INE	NUMBER: PAGE 65 OF 70				
ITEN	ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only 21b	y one) 22 23 26 27				
		Detailed	Summary Page			28a	22 23 20 21 28b 28c x 29 30b				
	formation copied from such Reports and State commercial purposes, other than using the na						on for the purpose of soliciting contributions				
	ME OF COMMITTEE (In Full)					_					
S	elective Insurance Company of A	America I	Political Acti	ion C	om	mit	ttee				
	I Name (Last, First, Middle Initial) uild PA PAC						Date of Disbursement				
Ма	iling Address P. O. Box 412						03 / D D / Y Y Y Y 08 / 2017				
City Ha	/ rrisburg	State PA	Zip Code 17108-0412				FEC Identification Number				
	pose of Disbursement PAC Dinner - Sen. Jake Corman				-	1	С				
Ca	ndidate Name			Cate	egory /pe	/	Transaction ID : BCC9226BC6 Amount of Each Disbursement this Period				
Off	ice Sought: House Disburse Senate	ement For: 2	2017 General	.,			1000.00				
Sta	te: District:	Other (spec	cify) ▼ Other				Memo Item				
	I Name (Last, First, Middle Initial)						Date of Disbursement				
B. C	itizens for Brian Feldman		M M / D D / Y Y Y Y								
Ма	iling Address 1200 Light Street Unit B						01 04 2017				
City Ba	/ Itimore	State MD	Zip Code 21230-4371				FEC Identification Number				
	pose of Disbursement vent at Harry Browne's				-	1	С				
Ca	ndidate Name			Category/ Type			Transaction ID : B9B37478271 Amount of Each Disbursement this Period				
Off	ice Sought: House Disburse	ement For: ; Primary	2016 General	,			250.00				
Sta	President						Memo Item				
-	I Name (Last, First, Middle Initial)										
C. C	ommittee to Elect Brian Bosma						Date of Disbursement				
Ма	iling Address P. O. Box 122						06 06 2017				
City Ind	y ianapolis	State IN	Zip Code 46206-0122				FEC Identification Number				
	pose of Disbursement ade Event - Contribution to Brian Bosma					1	С				
Ca	ndidate Name	Name					Transaction ID : BAE9C679FF Amount of Each Disbursement this Period				
Off		louse Disbursement For: 2017 General Primary General		,	Туре		1000.00				
Sta	President	Other (spe					Memo Item				
			01101								
SUB.	TOTAL of Disbursements This Page (optional).						2250.00				
Тотя	L This Period (last page this line number only	/)					, ,				

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 66 OF 70			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) Selective Insurance Company of A	America	Political Actio	on Commit	tee			
Full Name (Last, First, Middle Initial) A. Ed Gillespie For Governor				Date of Disbursement			
Mailing Address 2100 Maywell Street				02 28 2017			
City Richmond	State VA	Zip Code 23230-3218		FEC Identification Number			
Purpose of Disbursement AIA Event in Support of Ed Gillespie for Governor				C Transaction ID : B0E2427E47f			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse Senate President X	ement For: Primary Other (spe	General		1000.00			
State: District: Full Name (Last, First, Middle Initial) B. Friends of Big Ed Reilly	_	Other		Date of Disbursement			
Mailing Address 191 Main Street Suite 310	lailing Address 191 Main Street						
City Annapolis Purpose of Disbursement	State MD	Zip Code 21401-2015		FEC Identification Number			
Senate Finance Republicans Event			Category/ Type	Transaction ID : B725BE497E8 Amount of Each Disbursement this Perio			
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	2016 General		250.00			
State: District:		Other		Memo Item			
Full Name (Last, First, Middle Initial) C. Friends of Don White				Date of Disbursement			
Mailing Address P.O. Box 363				05 22 2017			
City Indiana Purpose of Disbursement Insurance Federation of PA Dinner - Don White	se of Disbursement ance Federation of PA Dinner - Don White						
Candidate Name							
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		1000.00			
State: District:		Other		Memo Item			
SUBTOTAL of Disbursements This Page (optional).				2250.00			

S	CHEDULE B (FEC Form 3X)			F	OR L	INE N	NUMBER: PAGE 67 OF 70				
IT	ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only	one)				
			Summary Page			21b 28a	22 23 26 27 28b 28c x 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	n for the purpose of soliciting contributions				
$ \rangle$	NAME OF COMMITTEE (In Full)	· · -	-	_							
Ľ	Selective Insurance Company of A	America I	Political Acti	on C	or	mitt	iee				
A.	Full Name (Last, First, Middle Initial) Friends of Glen Sturtevant						Date of Disbursement				
	Mailing Address PO Box 2535						04 / D D / Y Y Y Y Y 04 24 2017				
	City	State	Zip Code				FEC Identification Number				
	Midlothian Purpose of Disbursement	VA	23113-8535				\square				
	Breakfast Sponsorship in Support of G. Sturtevant						C				
	Candidate Name				egory ype	//	Transaction ID : BE01803ACC Amount of Each Disbursement this Period				
		ment For: 2					250.00				
	State: District:	Primary Other (spec	Cify) ▼ Other				Memo Item				
	Full Name (Last, First, Middle Initial)		Other			_					
В.	Friends of Joe Scarnati						Date of Disbursement				
	Mailing Address P. O. Box 177					04 12 2017					
	City	State PA	Zip Code				FEC Identification Number				
	Brockway Purpose of Disbursement	ГА	15824-0177	_	_	_	С				
	PA Senate President Pro Tem - Industry Dinner Fo						Transaction ID : BDAFFAC3D				
	Candidate Name			Category/			Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ement For: 2	2017	Ľ	ype		1000.00				
	Senate	Primary	General								
	State: District:	Other (spec	cify) Other				Memo Item				
с.	Full Name (Last, First, Middle Initial) Friends of John Astle						Date of Disbursement				
	Mailing Address 1200 Light Street						01 04 2017				
	Unit B	0.1-1									
	City Baltimore	State MD	Zip Code 21230-4371				FEC Identification Number				
	Purpose of Disbursement Event at Harry Browne's				-		С				
	Candidate Name						Transaction ID : B195C3E324 Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ment For: 2	ment For: 2017				200.00				
	Senate	Primary	General				-				
	State: District:	Other (spec	Other				Memo Item				
							1450.00				
s	UBTOTAL of Disbursements This Page (optional).						1450.00				
т	OTAL This Period (last page this line number only	/)					, ,				

SCHEDULE B (FEC Form 3X)			FOR I	NE NUMBER: PAGE 68 OF 70				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check d	only one)				
		Summary Page		1b 22 23 26 27 3a 28b 28c \mathbf{x} 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na			d by any p	erson for the purpose of soliciting contributions				
			•					
\rangle Selective Insurance Company of λ	America	Political Actio	on Comr	nittee				
Full Name (Last, First, Middle Initial) A. Friends of Ron Villanueva		Date of Disbursement						
Mailing Address PO Box 61005	Mailing Address PO Box 61005							
City Virginia Beach	State VA	Zip Code 23466-1005		FEC Identification Number				
Purpose of Disbursement Luncheon for Ron Villanueva		23400-1003		C				
Candidate Name				Transaction ID : B40708D686E				
			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate	ement For: 2	2017 General		250.00				
State: District:	Other (spe	cify) ▼ Other		Memo Item				
Full Name (Last, First, Middle Initial)		Other						
B. Friends of Thomas 'Mac' Middleto	n			Date of Disbursement				
Mailing Address P.O. Box 2502			01 04 2017					
City La Plata	State MD	Zip Code 20646-2502		FEC Identification Number				
Purpose of Disbursement Event at Governor Calvert House				С				
Candidate Name			Category/ Type	Transaction ID : BD45CB3ED/ Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:		1990	250.00				
President	Primary Other (spe	2,		Memo Item				
State: District: Full Name (Last, First, Middle Initial)		Other						
C. Larry Hogan for Governor				Date of Disbursement				
Mailing Address P. O. Box 6559				06 / 06 / Y Y Y Y 06 / 06				
City Annapolis	State MD	Zip Code 21401-0559		FEC Identification Number				
Purpose of Disbursement Industry Group Event - Gov. Hogan		21401-0000		C				
Candidate Name			Category/ Type	Transaction ID : BB865AD6B, Amount of Each Disbursement this Period				
			21 °	2000.00				
President	Primary Other (spe	General cify) ▼						
State: District:		Other		Memo Item				
SUBTOTAL of Disbursements This Page (optional)				2500.00				
TOTAL This Period (last page this line number onl	y)							

	SCHEDULE B (FEC Form 3			FOR LINE	NUMBER: PAGE 69 OF 70			
Detailed Summary Page 20 <t< th=""><th>ITEMIZED DISBURSEMENTS</th><th></th><th></th><th>³⁾ (check only</th><th colspan="4">one)</th></t<>	ITEMIZED DISBURSEMENTS			³⁾ (check only	one)			
Any Information copied from such Reports and Stataments may not be add or used by any person for the purpose of detailing unstabutions from such committee. NAME OF COMMITTEE (in Full) Selective Insurance Company of America Political Action Committee Full Name (Last, First, Midde Initial) A. Massachusetts Republican Party Maiing Address 85 Merrinac St. 400 City Boaton Marke (Last, First, Midde Initial) A. Massachusetts Republican Party Maiing Address 85 Merrinac St. 400 City Boaton Market Cast, First, Midde Initial) A. Trade Event for Governor Charle Baker Candidate Name Other Full Name (Last, First, Midde Initial) B. McDougle for Senate President Distoursement Mailing Address 1331 East Cary St. City Rahmond Purpose of Disbursement Industry Group Event - State Sen. McDougle Candidate Name City State: Distoursement Industry Group Event - State Sen. McDougle Candidate Name <								
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Full Name (Last, First, Middle Initial) Date of Disbursement A Massachusetts Republican Party Mailing Address 85 Merrimac St. 400 2017 City Boston State 2114-4728 Purpose of Disbursement Ma Trade Event for Governor Charle Baker Category Transaction ID : BA34F21ADL Citice Sought: House President Disbursement For: 2017 Primary General Category Type Office Sought: House President Disbursement For: 2017 Primary Other Full Name (Last, First, Middle Initial) Other (specify) Other 3. McDougle for Senate Disbursement For: 2017 Primary Date of Disbursement Full Name (Last, First, Middle Initial) State Disbursement For: 2017 Primary Date of Disbursement Office Sought: House President Disbursement For: 2017 Primary Category Type Transaction ID : B2407372AE4 Transaction ID : B3005102A Anount of Each Disbursement His Period State: Disbursement For: 2017 Primary Other Date of Disbursement State: Disbursement For: 2017 Primary Category Type Transaction ID : B3005102A Anount of Each Disbursement, His Period					4			
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 70 OF 70				
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check onl 21b 28a					
Any information copied from such Reports and State or for commercial purposes, other than using the na								
Selective Insurance Company of A	America	Political Actio	on Commi	ITTEE				
Full Name (Last, First, Middle Initial) A. Susan Aumann for Delegate	Date of Disbursement							
Mailing Address 538 Wyngate Road				01 04 2017				
City	State	Zip Code		FEC Identification Number				
Lutherville Timonium Purpose of Disbursement Economic Matters Committee Republicans Event	MD	21093-2843		C				
Candidate Name			Category/ Type	Transaction ID : B9A1302106F Amount of Each Disbursement this Period				
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