

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2008 APR 15 AM 9:33

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

ADDRESS (number and street)

6785 Westown Parkway West Des Moines IA 50266-7727

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00117614

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1) [checked]
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)
Election on [] in the State of []

(d) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)
Election on [] in the State of []

5. Covering Period

07 01 2008 through 03 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Oscar Deardorff

Signature of Treasurer

[Handwritten Signature]

Date

04 10 2008

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

Office Use Only

FEC FORM 3X Rev. 12/2004

28039683835

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Farmers Mutual Fire Insurance Company of Iowa Political Action Committee

Report Covering the Period: From:

01 ' 01 ' 2008

To:

03 ' 31 ' 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2008		44,030.26
(b) Cash on Hand at Beginning of Reporting Period.....	44,030.26	
(c) Total Receipts (from Line 19).....	5,305.19	5,305.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	49,335.45	49,335.45
7. Total Disbursements (from Line 31).....	5,711.00	5,711.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	43,624.45	43,624.45
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

28039683836

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Report Covering the Period: From: 01 / 01 / 2008 To: 03 / 31 / 2008

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1,606.88

1,606.88

3,474.49

3,474.49

- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

5,081.37

5,081.37

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

223.82

223.82

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

5,305.19

5,305.19

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

5,305.19

5,305.19

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	411.00	411.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	411.00	411.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5300.00	5300.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5711.00	5711.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5711.00	5711.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3)	5081.37	5081.37
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5081.37	5081.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	411.00	411.00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	411.00	411.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

NAME OF COMMITTEE (In Full)
Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

A. Full Name (Last, First, Middle Initial)
Deardorff, Oscar L.

Mailing Address
15806 Maple Drive

City *Urbandale* State *IA* Zip Code *50323*

FEC ID number of contributing federal political committee. *C00117614*

Name of Employer *Farmers Mutual Hail Ins. Co.* Occupation *Ex. Administrator - Govt. Affairs*

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date *300.00*

Date of Receipt
01 ' 04 ' 2008

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Fischer, Steven G.

Mailing Address
603 13th Street SE

City *Altoona* State *IA* Zip Code *50009*

FEC ID number of contributing federal political committee. *C00117614*

Name of Employer *Farmers Mutual Hail Ins. Co.* Occupation *V.P. Human Relations*

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date *270.00*

Date of Receipt
01 ' 04 ' 2008

Amount of Each Receipt this Period
270.00

C. Full Name (Last, First, Middle Initial)
Liljedahl, Kenneth J.

Mailing Address
8935 Lyndhurst

City *Johnston* State *IA* Zip Code *50131*

FEC ID number of contributing federal political committee. *C00117614*

Name of Employer *Farmers Mutual Hail Ins. Co.* Occupation *Corporate Services Manager*

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date *260.00*

Date of Receipt
01 ' 04 ' 2008

Amount of Each Receipt this Period
260.00

SUBTOTAL of Receipts This Page (optional)..... *830.00*

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

28039683840

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **2** OF **2**

(check only one)

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Rutledge, Scott*

Mailing Address

1501 Buffalo Road

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing federal political committee.

C00117614

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Senior V.P. & Secretary

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2008

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

206.88

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. *Rutledge, Steven C.*

Mailing Address

3421 Briar Ridge

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing federal political committee.

C00117614

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

President & CEO

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

27000

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

27.00

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. *Shepard, Rebecca A.*

Mailing Address

1500 Crown Colony Court #6100

City

Des Moines

State

IA

Zip Code

50315

FEC ID number of contributing federal political committee.

C00117614

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Corporate Administrator

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

30000

Date of Receipt

01 04 2008

Amount of Each Receipt this Period

30000

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

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

776.88

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

1,606.88

28039683841

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 1
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

A. Full Name (Last, First, Middle Initial) *King for Congress*

Mailing Address *P.O. Box 1082*

City *Springfield* State *IA* Zip Code *22151*

Purpose of Disbursement *Contribution* Category/Type *011*

Candidate Name *Steve King*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *IA* District: *5th*

Date of Disbursement: *03/09/2008*

Amount of Each Disbursement this Period: *300.00*

B. Full Name (Last, First, Middle Initial) *Johanns for U.S. Senate*

Mailing Address *1201 "O" Street Suite 101*

City *Lincoln* State *NE* Zip Code *68508*

Purpose of Disbursement *Contribution* Category/Type *011*

Candidate Name *Mike Johanns*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *NE* District:

Date of Disbursement: *03/13/2008*

Amount of Each Disbursement this Period: *1,000.00*

C. Full Name (Last, First, Middle Initial) *PCI PAC*

Mailing Address *2600 South River Road*

City *Des Plaines* State *IL* Zip Code *60018-3286*

Purpose of Disbursement *Contribution* Category/Type *011*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: *03/18/2008*

Amount of Each Disbursement this Period: *2,000.00*

SUBTOTAL of Disbursements This Page (optional)..... ▶ *3,300.00*

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

28039683842

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 2 OF 2
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)
Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

A. **NAMIC PAC**

Full Name (Last, First, Middle Initial)

Mailing Address: *122 "C" Street NW, Suite 540*

City: *Washington* State: *DC* Zip Code: *20001*

Purpose of Disbursement: *Contribution*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement: *03 / 18 / 2008*

Amount of Each Disbursement this Period: *2,000.00*

Category/Type: *01.1*

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶ *2,000.00*

TOTAL This Period (last page this line number only).....▶ *5,300.00*

28039683843

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
4/11/08

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JmW 4/15/08
 PREPARER DATE PREPARED

28039683844