

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

ONE GEICO PLAZA

Check if different than previously reported. (ACC)

WASHINGTON

DC

20076

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00343749

3. IS THIS REPORT

x

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

x July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01

01

2005

through

06

30

2005

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

Type or Print Name of Treasurer

Michael Campbell

Signature of Treasurer

Electronically Filed by Michael Campbell

Date

07

13

2005

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. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: ^{MM}01 ^{DD}01 ^{YYYY}2005 To: ^{MM}06 ^{DD}30 ^{YYYY}2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^{YYYY} 2005		30528.02
(b) Cash on Hand at Beginning of Reporting Period	30528.02	
(c) Total Receipts (from Line 19)	11177.50	11177.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41705.52	41705.52
<hr/>		
7. Total Disbursements (from Line 31)	20500.00	20500.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21205.52	21205.52
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: ^M01 ⁻01 ⁻2005 To: ^M06 ⁻30 ⁻2005

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)	2587.00	2587.00
(ii) Unitemized	8590.50	8590.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))	11177.50	11177.50
(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)	11177.50	11177.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11177.50	11177.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11177.50	11177.50

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20500.00	20500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20500.00	20500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	20500.00	20500.00

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)	11177.50	11177.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11177.50	11177.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 17

(check only one)
 11a 13
 11b 14
 11c 15
 12 16
 17

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

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

Full Name (Last, First, Middle Initial) A. Peter Chin Aiong		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 533 Kersten Street		Transaction ID: SA11A1.13637	
City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly	
Name of Employer GEICO	Occupation AVP	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00

Full Name (Last, First, Middle Initial) B. Charles Davies		Date of Receipt M / D / Y 03 / 24 / 2005	
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.13245	
City Warrenton	State VA	Zip Code 22186	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly	
Name of Employer GEICO	Occupation VP	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) C. Charles Davies		Date of Receipt M / D / Y 04 / 20 / 2005	
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.13371	
City Warrenton	State VA	Zip Code 22186	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly	
Name of Employer GEICO	Occupation VP	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Charles Davies		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.13503
City Warrenton	State VA	Zip Code 22186
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Charles Davies		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 157 Culpeper Street		Transaction ID: SA11A1.13640
City Warrenton	State VA	Zip Code 22186
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. John Geer		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 2902 Gretna Place		Transaction ID: SA11A1.13643
City Vienna	State VA	Zip Code 22181
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GEICO	Occupation AVP	Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Robert Miller		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 2820 Amherst Avenue		Transaction ID: SA11A1.13589
City University Park	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GEICO	Occupation Regional VP	Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Olan Nicely		Date of Receipt M / D / Y 02 / 24 / 2005
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.13126
City Great Falls	State VA	Zip Code 22066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 154.00
Name of Employer GEICO	Occupation President-Insurance operations	Payroll deduction \$77.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 308.00	

Full Name (Last, First, Middle Initial) C. Olan Nicely		Date of Receipt M / D / Y 03 / 24 / 2005
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.13282
City Great Falls	State VA	Zip Code 22066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 154.00
Name of Employer GEICO	Occupation President-Insurance operations	Payroll deduction \$77.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 482.00	

SUBTOTAL of Receipts This Page (optional) ▶ **368.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 17

(check only one)
 11a 13
 11b 14
 11c 15
 12 16
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NAME OF COMMITTEE (In Full)
 GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ola Nicely		Date of Receipt M / D / Y 04 / 20 / 2005	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.13988	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 154.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$77.00 biweekly	
Name of Employer GEICO	Occupation President-Insurance operations		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00		

Full Name (Last, First, Middle Initial) B. Ola Nicely		Date of Receipt M / D / Y 05 / 18 / 2005	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.13520	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 154.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$77.00 biweekly	
Name of Employer GEICO	Occupation President-Insurance operations		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00		

Full Name (Last, First, Middle Initial) C. Ola Nicely		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 805 Nethercliffe Hall Road		Transaction ID: SA11A1.13857	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 231.00		
FEC ID number of contributing federal political committee. C		Payroll deduction \$77.00 biweekly	
Name of Employer GEICO	Occupation President-Insurance operations		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

SUBTOTAL of Receipts This Page (optional)	539.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Jess Reed		Date of Receipt M / D / Y 04 / 20 / 2005
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.13993
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Jess Reed		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.13525
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Jess Reed		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 8500 Hawkins Creamery Road		Transaction ID: SA11A1.13882
City Gaithersburg	State MD	Zip Code 20879
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$30.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	210.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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

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

Full Name (Last, First, Middle Initial) A. William Roberts		Date of Receipt M / D / Y Y Y Y 03 / 24 / 2005
Mailing Address 8529 78th Place		Transaction ID: SA11A1.13288
City	State	Zip Code
Cabin John	MD	20818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. William Roberts		Date of Receipt M / D / Y Y Y Y 04 / 20 / 2005
Mailing Address 8529 78th Place		Transaction ID: SA11A1.13394
City	State	Zip Code
Cabin John	MD	20818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. William Roberts		Date of Receipt M / D / Y Y Y Y 05 / 18 / 2005
Mailing Address 8529 79th Place		Transaction ID: SA11A1.13528
City	State	Zip Code
Cabin John	MD	20818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. William Roberts		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 852B 78th Place		Transaction ID: SA11A1.13693
City Cabin John	State MD	Zip Code 20818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer GEICO	Occupation VP	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Louis Simpson		Date of Receipt M / D / Y 03 / 24 / 2005
Mailing Address 800 North Michigan Ave, Unit 45D1		Transaction ID: SA11A1.13273
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Plaza Investment Managers	Occupation President - Capital operations	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Louis Simpson		Date of Receipt M / D / Y 04 / 20 / 2005
Mailing Address 800 North Michigan Ave, Unit 45D1		Transaction ID: SA11A1.13400
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Plaza Investment Managers	Occupation President - Capital operations	Payroll deduction \$50.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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

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

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Detailed Summary Page

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

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

Full Name (Last, First, Middle Initial) A. Louis Simpson		Date of Receipt M / D / Y 05 / 18 / 2005	
Mailing Address 800 North Michigan Ave, Unit 45D1		Transaction ID: SA11A1.13531	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly	
Name of Employer Plaza Investment Managers	Occupation President - Capital operations		Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Louis Simpson		Date of Receipt M / D / Y 05 / 30 / 2005	
Mailing Address 800 North Michigan Ave, Unit 45D1		Transaction ID: SA11A1.13668	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly	
Name of Employer Plaza Investment Managers	Occupation President - Capital operations		Aggregate Year-to-Date ▼ 650.00
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	2587.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 17

<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. BACPAC

Mailing Address 616 E Street, N.W., Suite 802

City Washington State DC Zip Code 20004

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Disbursement For: 2006
Senate Primary X General
President Other (specify) ▼

State: District

Transaction ID: SB23.13539
Date of Disbursement
05 / 24 / 2005

Amount of Each Disbursement this Period
2000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. Bob Ney for Congress

Mailing Address P.O. Box 480

City St. Clairsville State OH Zip Code 43050

Purpose of Disbursement
Campaign Contribution

Candidate Name
Bob Ney for Congress

Office Sought: X House Disbursement For: 2006
Senate Primary X General
President Other (specify) ▼

State: OH District 18

Transaction ID: SB23.13410
Date of Disbursement
04 / 25 / 2005

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. Cantor for Congress

Mailing Address PO Box 17B13

City Richmond State VA Zip Code 23226

Purpose of Disbursement
Campaign Contribution

Candidate Name
Cantor for Congress

Office Sought: X House Disbursement For: 2006
Senate Primary X General
President Other (specify) ▼

State: VA District 07

Transaction ID: SB23.13145
Date of Disbursement
02 / 01 / 2005

Amount of Each Disbursement this Period
2500.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 17

<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Friends of Dave Reichert

Mailing Address Post Office Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement Campaign Contribution

Candidate Name Friends of Dave Reichert

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: WA District B

Transaction ID: SB23.13544
Date of Disbursement
06 / 28 / 2005

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. Friends of George Allen

Mailing Address 1805 Monument Avenue

City Richmond State VA Zip Code 23220

Purpose of Disbursement Campaign Contribution

Candidate Name Friends of George Allen

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: VA District

Transaction ID: SB23.13149
Date of Disbursement
02 / 25 / 2005

Amount of Each Disbursement this Period
2000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. KOMPAC

Mailing Address P.O. Box 20209

City Alexandria State VA Zip Code 22320

Purpose of Disbursement Campaign Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: District

Transaction ID: SB23.13150
Date of Disbursement
03 / 08 / 2005

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶ **4000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 17

<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Leadership PAC 2006

Mailing Address 675 North Washington Street, Suite

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2006
Primary X General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.13152
Date of Disbursement
03 / 08 / 2005

Amount of Each Disbursement this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Property Casualty Insurers PAC

Mailing Address 2600 South River Road

City Des Plaines State IL Zip Code 60018-3286

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2006
Primary X General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.13540
Date of Disbursement
06 / 18 / 2005

Amount of Each Disbursement this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Scott Garrett for Congress

Mailing Address Post Office Box 805

City Newton State NJ Zip Code 07860

Purpose of Disbursement
Campaign Contribution

Candidate Name
Scott Garrett for Congress

Office Sought: House Senate President
State: NJ District 5

Disbursement For: 2006
Primary X General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.13545
Date of Disbursement
06 / 28 / 2005

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8500.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. The PRYCE Project

Mailing Address 1155 21st Street, Suite #300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary X General Other (specify) ▼

State: District

011
Category/
Type

Transaction ID: SB23.13154

Date of Disbursement

03 / 08 / 2005

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. TOMPAC

Mailing Address P.O. Box 16488

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary X General Other (specify) ▼

State: District

011
Category/
Type

Transaction ID: SB23.13147

Date of Disbursement

02 / 25 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

20500.00