

# 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  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 7 HANOVER SQUARE  
 Check if different than previously reported. (ACC)  
NEW YORK NY 10004

2. **FEC IDENTIFICATION NUMBER** C00418731  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 2009 through 06 30 2009

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 Rob Eden

Signature of Treasurer Electronically Filed by Rob Eden Date 07 02 2009

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

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

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

Write or Type Committee Name  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		48195.11
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	48195.11									
(c) Total Receipts (from Line 19) .....	4084.94	4084.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52280.05	52280.05								
7. Total Disbursements (from Line 31) .....	3113.98	3113.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	49166.07	49166.07								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:    To:

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) .....	1395.91	1395.91
(ii) Unitemized .....	2689.03	2689.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4084.94	4084.94
(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) .....	4084.94	4084.94
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)) .....	4084.94	4084.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4084.94	4084.94

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	113.98	113.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	113.98	113.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	3000.00
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 Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3113.98	3113.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3113.98	3113.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	4084.94	4084.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4084.94	4084.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	113.98	113.98
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	113.98	113.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Ronald L Alexander	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 1604 Bingham Dr	<b>Transaction ID:</b> 148-P2528
	City State Zip Code Knoxville TN 37922-8066	Amount of Each Receipt this Period 20.83
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20.83 Semi-Monthly)
	Name of Employer Willis of Tennessee, Inc. Occupation Managing Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.30	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael W. Anderson	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 499 Anna Lynn Ln	<b>Transaction ID:</b> 148-P2529
	City State Zip Code Horsham PA 19044-1511	Amount of Each Receipt this Period 250.02
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$41.67 Semi-Monthly)
	Name of Employer Willis Americas Admin. Occupation Senior Resource Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.70	

<b>C.</b>	Full Name (Last, First, Middle Initial) Donald J Bailey	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 107 Westminster Road	<b>Transaction ID:</b> 148-P2530
	City State Zip Code Chatham NY 79280-2616	Amount of Each Receipt this Period 250.02
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$41.67 Semi-Monthly)
	Name of Employer Willis Americas Admin. Occupation National Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.70	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	520.87
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paul R. Becker</p> <p>Mailing Address 9504 Ashford Pl</p> <p>City State Zip Code <b>Brentwood TN 37027-8750</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Willis Americas Admin. Occupation National Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">208.30</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2009</span></p> <p><b>Transaction ID: 148-P2531</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.83</span></p> <p>Payroll Deduction (\$20.83 Semi-Monthly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Terry L. Burston</p> <p>Mailing Address 5050 Dublin Dr SW</p> <p>City State Zip Code <b>Atlanta GA 30331-7873</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Willis North America Occupation Regional Compliance Office</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">208.30</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2009</span></p> <p><b>Transaction ID: 148-P2532</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.83</span></p> <p>Payroll Deduction (\$20.83 Semi-Monthly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) William L Esler</p> <p>Mailing Address 6027 Rose St</p> <p>City State Zip Code <b>Houston TX 77007-5009</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Willis of Texas, Inc. Occupation Managing Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">416.70</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2009</span></p> <p><b>Transaction ID: 148-P2533</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.02</span></p> <p>Payroll Deduction (\$41.67 Semi-Monthly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">291.68</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Paul A Gibbs

Mailing Address 1334 Oak Grove Ave

City State Zip Code  
**San Marino CA 91108-1033**

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

Name of Employer Willis Americas Admin      Occupation National Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.30**

Date of Receipt MM / DD / YYYY  
**06 / 30 / 2009**

**Transaction ID: 148-P2534**

Amount of Each Receipt this Period **20.83**

Payroll Deduction  
**(\$20.83 Semi-Monthly)**

**B.** Full Name (Last, First, Middle Initial)  
Deneen M Huber

Mailing Address 3607 Northridge Dr

City State Zip Code  
**Allison Park PA 15101-5003**

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

Name of Employer Willis Americas Admin.      Occupation Senior Resource Consultant

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt MM / DD / YYYY  
**06 / 30 / 2009**

**Transaction ID: 148-P2536**

Amount of Each Receipt this Period **250.02**

Payroll Deduction  
**(\$41.67 Semi-Monthly)**

**C.** Full Name (Last, First, Middle Initial)  
Todd J. Jones

Mailing Address 637 Goose Neck Dr

City State Zip Code  
**Lititz PA 17543-8368**

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

Name of Employer Willis Americas Admin.      Occupation National Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.30**

Date of Receipt MM / DD / YYYY  
**06 / 30 / 2009**

**Transaction ID: 148-P2538**

Amount of Each Receipt this Period **20.83**

Payroll Deduction  
**(\$20.83 Semi-Monthly)**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **291.68**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 12  
(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)  
**WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Jay M. Kirschbaum

Mailing Address 1520 Woodroyal East Dr

City State Zip Code  
**Chesterfield MO 63017-5550**

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

Name of Employer Willis Americas Admin. Occupation Senior Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt **06 / 30 / 2009**

**Transaction ID: 148-P2539**

Amount of Each Receipt this Period **250.02**

Payroll Deduction **(\$41.67 Semi-Monthly)**

**B.** Full Name (Last, First, Middle Initial)  
Robert M. Marshall

Mailing Address 26 Intone Ln

City State Zip Code  
**Matawan NJ 07747-1719**

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

Name of Employer Willis of New York Occupation Senior Client Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **208.30**

Date of Receipt **06 / 30 / 2009**

**Transaction ID: 148-P2540**

Amount of Each Receipt this Period **20.83**

Payroll Deduction **(\$20.83 Semi-Monthly)**

**C.** Full Name (Last, First, Middle Initial)  
Janis R. Pate

Mailing Address 708 Cedar St Apt A

City State Zip Code  
**Santa Monica CA 90405-3830**

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

Name of Employer Willis Americas Admin Occupation Regional Service Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **208.30**

Date of Receipt **06 / 30 / 2009**

**Transaction ID: 148-P2541**

Amount of Each Receipt this Period **20.83**

Payroll Deduction **(\$20.83 Semi-Monthly)**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **291.68**

**TOTAL** This Period (last page this line number only) ..... ► **1395.91**

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address P.O. Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 136</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 16.55</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address P.O. Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Acct Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 137</p> <p>Date of Disbursement 02 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 16.39</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address P.O. Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Account Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 143</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 17.35</p> <p>001 Category/Type</p>

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

50.29

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address P.O. Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Account Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 144</p> <p>Date of Disbursement 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 18.65</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address PO Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 147</p> <p>Date of Disbursement 05 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 22.66</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville</p> <p>Mailing Address P.O. Box 305110</p> <p>City Nashville State TN Zip Code 37230</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 149</p> <p>Date of Disbursement 06 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 22.38</p> <p>001 Category/ Type</p>

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

63.69

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

113.98

**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 12 / 12

<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)  
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE

Transaction ID: 138

Date of Disbursement

Mailing Address 701 Pennsylvania Avenue NW

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	9

City Washington State DC Zip Code 20004

Amount of Each Disbursement this Period

3000.00
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Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name  
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

3000.00
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TOTAL This Period (last page this line number only) .....

3000.00
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