04/14/2010 18:03

Image# 10990530879

# **FORM 3X**

FE6AN026

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

_	F	or Oth	er Than An	Authorize	ed Commit	ttee		Office Use C	Only
1.			MAILING LA		xample:If typin ver the lines	ng, type	• • • •		
	CUNA Mutual Insurance Socie	ety Politica	al Action Comm	nittee (CUNA	Mutual PAC)				
			1 1 1 1 1	1 1 1 1			1 1 1 1	<u> </u>	
ĄD	DRESS (number and street)	5910 N	Mineral Point R	d, PO Box 74	7	1 1 1 1	1 1 1 1		
•		Mail St	top 5910 4 A2						
L	Check if different than previously reported. (ACC)	Madiso	on				LWI	5370	0747
2.	FEC IDENTIFICATION NUMBER	BER 1	<b>-</b>	CITY 🛕		:	STATEA	ZIF	CODE A
	C00402107			3. IS THIS REPOR	Т	NEW (N) OR		MENDED A)	
4.	TYPE OF REPORT (Choose One)	Ì΄β	Monthly Report	Feb 20 (M2		May 20 (M5)	H	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)	Se	p 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	X April 15 Quarterly Report(Q1	,   -		Apr 20 (M4	4)	Jul 20 (M7)	Oc	t 20 (M10)	Jan 31 (YE)
	July 15	(c	) 12-Day <b>PRE</b> -Electi	on 📙	Primary (12	2P)	Genera	(12G)	Runoff (12R)
	Quarterly Report(Q2 October 15		Report for t		Convention	(12C)	Special	(12G)	
	Quarterly Report(Q3 January 31 Quarterly Report(YE			Election on					the ate of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	(d	) 30-Day Post -Elec		General (30	0G)	Runoff	(30R)	Special (30S)
	Termination Report (TER)		,	Election on			• • •		the ate of
5.	Covering Period 0 1	0	1 201	0	through	03	3 1	2010	
	ertify that I have examined this R	•	to the best of topher P. Roe	ny knowledge	e and belief it i	s true, correct	and complete	).	
. 16	or or microamo or moderaror		-						
Sig	nature of Treasurer Electron	ically Filed	d by Christo	oher P. Roe		D	ate 04	1 4	2010
NO	TE : Submission of false, erron	eous, or ir	ncomplete infor	mation may s	ubject the per	son signing thi	s Report to th	ne penalties of	2 U.S.C 437g.
	Office Use								ORM 3X 2/2004)

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/16 FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC) м м 0 1 м м 0 3 <sup>D</sup> 31 D D 0 1 2010 2010 To: Report Covering the Period: From:

	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1  2010		12207.20
	(b) Cash on Hand at Begining of Reporting Period	12207.20	
	(c) Total Receipts (from Line 19)	10635.04	10635.04
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22842.24	22842.24
7.	Total Disbursements (from Line 31)	14792.00	14792.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8050.24	8050.24
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	

X 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) 3 / 16

Write or Type Committee Name

CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

м м 0 1

Report Covering the Period:

From:

D D 0

2010

то:

М М

D D 31

Y Y Y Y 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	6600.04	6600.04
(ii) Unitemized	4035.00	4035.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10635.04	10635.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10635.04	10635.04
Transfers From Affiliated/Other     Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made     to Federal candidates and Other     Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3. 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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10635.04	10635.04
Total Federal Receipts     (subtract Line 18(c) from Line 19)	10635.04	10635.04

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/16

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	42.00	42.00
	Expenditures(c) Total Operating Expenditures	42.00	42.00
	(add 21(a)(i), (a)(ii) and (b))	42.00	42.00
2.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	14750.00	14750.00
4.	Independent Expenditure	0.00	0.00
:5.	(use Schedule E)	0.00	0.30
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(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
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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	0.00	0.00
	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))	14792.00	14792.00
32.	Total Federal Disbursements		
•	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	14792.00	14792.00

### **DETAILED SUMMARY PAGE**

of Disbursements

5 / 16

	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)	10635.04	10635.04
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	10635.04	10635.04
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	42.00	42.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	42.00	42.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 16 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  CUNA Mutual Insurance Society Politi	Statements may not be sold or used by any persename and address of any political committee to call Action Committee (CUNA Mutual Page 1)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael T. Defnet  Mailing Address 8315 Flagstone Drive  City Madison  FEC ID number of contributing federal political committee.  Name of Employer CUNA Mutual Insurance Society Receipt For: Primary General Other (specify)	State Zip Code WI 53719  C  Occupation SVP, Distribution Support  Aggregate Year-to-Date ▼  240.00	Date of Receipt  M M M D D D Y Y Y Y Y Y  O 3 1 2 0 1 0  Transaction ID: SA11AI.5021  Amount of Each Receipt this Period  240.00  \$40/biweekly
Full Name (Last, First, Middle Initial) Jill Estep  Mailing Address 15 E. Lawrence Road  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer CUNA Mutual Group  Receipt For: Primary General Other (specify)	State Zip Code AZ 85012  C  Occupation Executive  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M   M   D   D   Z   Z   D   D
Full Name (Last, First, Middle Initial) Kevin T. Lentz  Mailing Address 1023 Carib Court  City Verona  FEC ID number of contributing federal political committee.  Name of Employer CUNA Mutual Insurance Society Receipt For: Primary General Other (specify)	State Zip Code WI 53593  C  Occupation SVP, Member Products  Aggregate Year-to-Date ▼  300.00	Date of Receipt  M M M / D D D / Y Y Y Y  O 3 1 2 0 1 0  Transaction ID: SA11AI.5034  Amount of Each Receipt this Period  300.00  \$50/biweekly
SUBTOTAL of Receipts This Page (optional)		790.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/16 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  CUNA Mutual Insurance Society Politi	Statements may not be sold or used by any persename and address of any political committee to call Action Committee (CUNA Mutual PA	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kurt Lin  Mailing Address 99013 Settlers Road  City Madison  FEC ID number of contributing federal political committee.  Name of Employer CUNA Mutual Group  Receipt For: Primary General Other (specify)	State Zip Code WI 53717  C  Occupation Managing Director, MCA Aggregate Year-to-Date  240.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Barbara Lutz  Mailing Address 1116 5th Street NW  City Waverly  FEC ID number of contributing federal political committee.  Name of Employer CUNA Mutual Group  Receipt For: Primary General Other (specify)	State Zip Code IA 50677  C  Occupation Executive  Aggregate Year-to-Date  300.00	Date of Receipt  0 3
Full Name (Last, First, Middle Initial) David P. Marks  Mailing Address 11 Richmond Road  City West Hartford  FEC ID number of contributing federal political committee.  Name of Employer Members Capital Advisors  Receipt For: Primary General Other (specify)	State Zip Code CT 06117  C  Occupation EVP & Chief Investment Off.  Aggregate Year-to-Date  240.00	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)		780.00

ITE	HEDULE A (FEC Form 3X)  MIZED RECEIPTS	otomonte ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 16 (check only one)    X   11a
or fo	information copied from such Reports and Stor commercial purposes, other than using the INAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Politic	name and ad	dress of any political committee to	o solicit contributions from such committee.
A. <u>J</u>	Full Name (Last, First, Middle Initial) lames Metz Mailing Address 3908 Meridian Circle  City Verona  FEC ID number of contributing ederal political committee.  Name of Employer CUNA Mutual Group  Receipt For:		Zip Code 53593  on set Management e Year-to-Date ▼	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
F	Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Faye Patzner	Aggregate	240.00	Date of Receipt
F for	Mailing Address 4473 Shooting Star Ave  City  Middleton  FEC ID number of contributing ederal political committee.  Name of Employer CUNA Mutual Group  Receipt For:  Primary  General  Other (specify)	State WI  C  Occupation SVP, Leg		Transaction ID: SA11AI.5026  Amount of Each Receipt this Period  210.00  \$35/biweekly
C. J. N. C. M. S.	Full Name (Last, First, Middle Initial)  Jeff H. Post  Mailing Address 2933 Windswept Way  City  Verona  FEC ID number of contributing ederal political committee.  Name of Employer CUNA Mutual Insurance Socety  Receipt For:  Primary General  Other (specify)		Zip Code 53593  on It and CEO e Year-to-Date ▼ 2500.00	Date of Receipt  M M M / D D M 2 2 0 1 0  Transaction ID: SA11AI.5015  Amount of Each Receipt this Period  2500.00  Check
SU	BTOTAL of Receipts This Page (optional)		)	2950.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 16 (check only one)    X   11a
A or	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	CUNA Mutual Insurance Society Polit	ical Action C	ommittee (CUNA Mutual PA	AC)
	Full Name (Last, First, Middle Initial) James M. Power			Date of Receipt
	Mailing Address 9810 Red Sky Drive			03 / 31 / 2010
	City Middleton	State WI	Zip Code 53562	Transaction ID: SA11AI.5044
	FEC ID number of contributing federal political committee.	C	33302	Amount of Each Receipt this Period 240.00
	Name of Employer CUNA Mutual Group	Occupatio SVP, Sa		\$40/biweekly
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 240.00	
	Full Name (Last, First, Middle Initial) Christopher P. Roe			Date of Receipt
	Mailing Address 2 Hawk Feather Cir			03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.5045
	Madison	WI	53717	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00 \$50/biweekly
	Name of Employer CUNA Mutual Insurance Soc- iety	Occupatio VP, Spec	n cial Projects	\$50/biweekiy
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	]
	Full Name (Last, First, Middle Initial) Richard Roy			Date of Receipt
	Mailing Address W278 N2987 Rocky F	Point Road		03 17 2010
	City	State	Zip Code	Transaction ID: SA11AI.5008
	Pewaukee FEC ID number of contributing federal political committee.	C	53072	Amount of Each Receipt this Period 500.00
	Name of Employer CUNA Mutual Group	Occupatio Officer	n	Check
	Receipt For:  Primary General  Other (specify) ▼	<del> '</del>	e Year-to-Date ▼ 500.00	
Г	SUBTOTAL of Receipts This Page (optional) .	1		1040.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 16 (check only one)    X
or fo	information copied from such Reports and Sor commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Politi	ical Action C	Committee (CUNA Mutual PA	AC)
<b>A</b> . <u>.</u>	Full Name (Last, First, Middle Initial) Alastair C. Shore			Date of Receipt
-	Mailing Address 9125 Aspen Grove La	ne 		03 31 7 2010
	City Madison	State WI	Zip Code 53717	Transaction ID: SA11AI.5053
- I	FEC ID number of contributing ederal political committee.	C	53717	Amount of Each Receipt this Period  240.00
į	Name of Employer CUNA Mutual Group	Occupation Chief Un	n derwriter	\$40/biweekly
Ī	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) Delania K. Truly	1		Date of Receipt
-	Mailing Address 521 Sunset Dr.			03 31 2010
	Dity	State	Zip Code	Transaction ID: SA11AI.5036
- I	Hurst FEC ID number of contributing ederal political committee.	C	76054	Amount of Each Receipt this Period  300.00
	Name of Employer CUNA Mutual Insurance Soc- ety	Occupation VP, South	n th Region	\$50/biweekly
I	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Robert N. Trunzo			Date of Receipt
ľ	Mailing Address 1044 Willow Drive			03 31 2010
	Dity	State	Zip Code	Transaction ID: SA11AI.5042
ı	Delafield FEC ID number of contributing ederal political committee.	C	53018	Amount of Each Receipt this Period 500.04
	Name of Employer CUNA Mutual Insurance Soc- ety	Occupation EVP & C	n Chief Sales Officer	\$83.34/biweekly
	Receipt For:  Primary  General  Other (specify)	<del>, '</del>	e Year-to-Date ▼ 500.04	
su	BTOTAL of Receipts This Page (optional)			1040.04
	TAL This Period (last page this line number			6600.04

A.

В.

C.

SCHEDULE B (FEC Form 3X)					FOR LII	NE N	IUMBE	R:			Р	AGE	11/	16
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the				<u>`</u>	only one)								
	Detailed:	Summary Page		╟	21b	$\vdash$	22 28a	LX	23 28		24 28c	_	25 29	26 30b
Any Information copied from such Reports and State	ments may no	ot be sold or used	d by	a		n for		ırpos	_	_		_		
or for commercial purposes, other than using the name	ne and addres	ss of any political	con	nr	nittee to	solic	it conti	ribut	ions	fror	n such	com	mittee	
NAME OF COMMITTEE (In Full)	A . I					<b>O</b> )								
CUNA Mutual Insurance Society Political	Action Con	imittee (CUNA	\ IVIL	ut	uai PA	C)								
Full Name (Last, First, Middle Initial)							Trans	acti	ion	ID:	SB23	.50	71	
ADLER FOR CONGRESS							Date							
Mailing Address 14 KNIGHTSWOOD DF	RIVE						o <sup>M</sup> 1	М	L	1 !	9 /	Y 2	ž 0 Ť	0 1
City	State	Zip Code					Amou	ınt o	f Ea	ach [	Disburs	emei	nt this	Period
MARLTON	NJ	08053					Π.				-	2	250.0	0
Purpose of Disbursement Contribution								-	-				-00.0	9
Candidate Name					egory/	'								
JOHN H. ADLER  Office Sought: X House Disburs	ement For:				уре									
	Primary	General												
President	Other (spe	ecify)												
State: NJ District: 03  Full Name (Last, First, Middle Initial)														
BILL FOSTER FOR CONGRESS COMMI	TTEE						Trans Date				SB23 ment	.508	33	
McTan Address BO D. Too								М		<sup>D</sup> 2 :		Y	201	O Y
Mailing Address PO Box 703							0.3		L	۷,	3	- 4	201	U
City Geneva	State IL	Zip Code 60134					Amou	ınt o	f Ea	ach [	Disburs	emei	nt this	Period
Purpose of Disbursement	IL	00134	_	_								Ę	500.0	0
Contribution														
Candidate Name G. WILLIAM (BIL FOSTER					egory/ ype									
Office Sought: X House Disburs	ement For:				7,60									
	Primary	General												
State: IL District: 14	Other (spe	ecity) 🔻												
Full Name (Last, First, Middle Initial)							Trans	sacti	ion	ID:	SB23	.510	)1	
CHRIS LEE FOR CONGRESS							Date		isbu	ırser	ment			
Mailing Address PO Box 15395							0 3	М	′	1	0 /	Y	ž o ť	0 <sup>Y</sup>
C'h.	Ctata	Zin Onda					A		· -	! [	2:-1			D. d. d
City Rochester	State NY	Zip Code 14615					Amou	int o	T Ea	acn L	Disburs	emei	nt this	Period
Purpose of Disbursement			Г		•		L.	0				Ę	500.0	0
Contribution Candidate Name			C	`ai	egory/									
CHRISTOPHER J. LEE					уре									
	ement For:	Constrail		_	<u></u>									
Senate X President	Other (spe	General cify)												
State: NY District: 26		- · •												
SUBTOTAL of Disbursements This Page (optional)					•	•						12	50.0	0
						-	$\overline{}$							-
<b>TOTAL</b> This Period (last page this line number only	')			• • • •	. )	•								

IT	CHEDULE B (FEC Form 3X)	Use separate s	chedule(s)	FOR LINE N	
••	EMIZED DISBURSEMENTS	for each catego Detailed Summ	ory of the (	(check only	one) 22 X 23 24 25 3 28a 28b 28c 29
	y Information copied from such Reports and			any person fo	r the purpose of soliciting contributions
or	for commercial purposes, other than using the	e name and address of a	iny political con	nmittee to solic	cit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Poli	tical Action Committe	ee (CUNA Mu	utual PAC)	
	Full Name (Last, First, Middle Initial) DRIEHAUS FOR CONGRESS				Transaction ID: SB23.5104 Date of Disbursement
	Mailing Address 650 Fox Trails Way	,			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & O \end{smallmatrix} \end{bmatrix}$
	City Cincinnati	State Zip ( OH 452	Code 233		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution				500.00
	Candidate Name STEVEN LEO DRIEHAUS		C	ategory/ Type	
	Office Sought:  X House  Senate  President	sbursement For:  X Primary  Other (specify)	General ▼		
	State: OH District: 01		•		
	Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS				Transaction ID: SB23.5107 Date of Disbursement
	Mailing Address Post Office Box 93	36			03 M / D15 / Y 2010 Y
	City Fargo	State Zip 0 ND 581	Code 06		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution				500.00
	Candidate Name EARL R. POMEROY		C	ategory/ Type	
	Senate President	sbursement For:  X Primary Other (specify)	General		
	State: ND District: 00  Full Name (Last, First, Middle Initial)				Transaction ID: SB23.5090
					Date of Disbursement
	FRIENDS OF JEB HENSARLING				
	Mailing Address PO Box 820504				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix} $
	Mailing Address PO Box 820504  City Dallas	State Zip 0 TX 753	Code 382		Amount of Each Disbursement this Period
	Mailing Address PO Box 820504  City Dallas  Purpose of Disbursement Contribution		882		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & 2 & O & I & O \end{smallmatrix} \end{bmatrix} \ \ \\$
	Mailing Address PO Box 820504  City Dallas  Purpose of Disbursement Contribution  Candidate Name JEB HON. HENSARLING	TX 753	882	ategory/ Type	Amount of Each Disbursement this Period
	Mailing Address PO Box 820504  City Dallas  Purpose of Disbursement Contribution Candidate Name JEB HON. HENSARLING  Office Sought: X House Senate President		382 C		Amount of Each Disbursement this Period
	Mailing Address PO Box 820504  City Dallas Purpose of Disbursement Contribution Candidate Name JEB HON. HENSARLING  Office Sought: X House Senate	TX 753	382 C		Amount of Each Disbursement this Period

		Use separate schedule(s)		JR LINE heck only				L		= 13/	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	È	21b 27	22 28a		23 28b		8c	25 29	26 30
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Political A	e and address of any political co	ommit	tee to sol							i 
<u>/_</u> <b>4</b> .	Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER  Mailing Address 509 MADISON AVE SUI	TE 1902			Trans Date of	of Dis	sburse	_		86 Ž 0 Ĭ 0	Y
	City NEW YORK	State Zip Code NY 10022			Amou	nt of	Each	Disbu	ırseme	nt this F	Period
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		ement For: Primary General Other (specify)									
3.	Full Name (Last, First, Middle Initial) GIVING WILLINGLY EMPOWERING NATIONALLY (GWEN) PAC  Mailing Address 1831 Bay Street, SE						sburse	SB. ement	23.50	93 Ž 0 Ť 0	Y
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). -	Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE				Trans Date o		sburse	ement	23.50		V
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	y Information copied from such Reports and Stater for commercial purposes, other than using the name											
$\rangle$	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society Political	Action Committee (CUN	Α Μι	utua	I PAC)							
<u> </u>	Full Name (Last, First, Middle Initial) PENNSYLVANIANS FOR KANJORSKI					Date	of Disk	ourse				
	Mailing Address 103 South Hanover Stre	et				0 <sup>M</sup> 2	M /	<sup>D</sup> 2	6 /	ž	0 1 0	Y
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	Purpose of Disbursement Contribution		Г							10	00.00	_
	Candidate Name PAUL E. KANJORSKI			ateg Typ								
		ement For:    Primary   General     Other (specify)   \(\bigvert	•									
	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS					Date	of Disk	ourse				_
	Mailing Address P. O. Box 1919 P. O. Box 1919					0 <sup>M</sup> 2	M /	<sup>D</sup> 0	1 /	Ý Ž	0 1 0	Y
	City Janesville	State Zip Code WI 53547				Amou	unt of E	Each	Disburs	semen	t this F	'erio
	Purpose of Disbursement Contribution									20	00.00	_
	Candidate Name PAUL D. RYAN			ateg Typ	-							
	X	ement For: Primary General Other (specify) ▼										
	Full Name (Last, First, Middle Initial) SHELBY FOR U S SENATE					Date	of Disk	ourse				
	Mailing Address POST OFFICE BOX 109	1				0 <sup>M</sup> 3	M /	<sup>D</sup> 1	<b>5</b> /	<sup>Y</sup> 2	0 1 0	Y
	City TUSCALOOSA	State Zip Code AL 35403				Amou	unt of E	Each	Disburs	semen	t this F	erio
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	Candidate Name RICHARD C SHELBY			ateg Typ								
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•	·	nd Statements may not be sold or used by the name and address of any political co	, ,	
١.	NAME OF COMMITTEE (In Full) CUNA Mutual Insurance Society P	olitical Action Committee (CUNA M	utual PAC)	
	Full Name (Last, First, Middle Initial)  TAMMY BALDWIN FOR CONGRE  Mailing Address P.O. Box 696	ESS		Transaction ID: SB23.5088 Date of Disbursement  O 2
  - 	City Madison Purpose of Disbursement Contribution	State Zip Code WI 53701		Amount of Each Disbursement this Period 250.00
	Candidate Name TAMMY BALDWIN		Category/ Type	
	Office Sought:  X House Senate President State: WI District: 02	Disbursement For:  X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	<u> </u>	14750.00