

**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

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

ADDRESS (number and street)

471 E BROAD ST

Check if different than previously reported. (ACC)

COLUMBUS

OH

43215

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00336834

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 L. Wiseman

Signature of Treasurer

Electronically Filed by Michael L. Wiseman

Date

07

11

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

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^M01 [:]01 ^Y2005 To: ^M06 [:]30 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		6479.67
(b) Cash on Hand at Beginning of Reporting Period	6479.67	
(c) Total Receipts (from Line 19)	10653.22	10653.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17132.89	17132.89
<hr/>		
7. Total Disbursements (from Line 31)	12327.00	12327.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4805.89	4805.89
<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

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Report Covering the Period: From: ^M01 ⁻01 ⁻2005 To: ^N06 ⁻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)	6048.00	6048.00
(ii) Unitemized	4599.00	4599.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10647.00	10647.00
(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)	10647.00	10647.00
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.)	6.22	6.22
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))	10653.22	10653.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10653.22	10653.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	27.00	27.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	27.00	27.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
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.....	9800.00	9800.00
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))..	12327.00	12327.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12327.00	12327.00

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)	10647.00	10647.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10647.00	10647.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27.00	27.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27.00	27.00

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

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

FOR LINE NUMBER: PAGE 6 / 15

(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)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. John J. Bishop		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 1390 Picardae Court		Transaction ID: SA11A1.5788	
City Powell	State OH	Zip Code 43065	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$50 bi-weekly	
Name of Employer Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) ▼	Occupation Chairman, President and CEO Aggregate Year-to-Date ▼ 600.00		
Full Name (Last, First, Middle Initial) B. John D. Coffman		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 7042 Tralee Drive		Transaction ID: SA11A1.5792	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 204.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$17 bi-weekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 204.00		
Full Name (Last, First, Middle Initial) C. Daniel L. Crawford		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 6323 Cook Road		Transaction ID: SA11A1.5794	
City Powell	State OH	Zip Code 43065	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25 bi-weekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶

1104.00

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 / 15

(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)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Craig G. Eberwine		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 142B Sedgefield Dr.		Transaction ID: SA11A1.5798
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll deduction \$25 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. David L. Kaufman		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 7925 Greenside Lane		Transaction ID: SA11A1.5808
City Worthington	State OH	Zip Code 43235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Motorists Mutual Insurance Company	Occupation Sr. Vice President, CIO	Payroll deduction \$30 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. John C. Keeler		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 391D Caswell Road		Transaction ID: SA11A1.5809
City Johnstown	State OH	Zip Code 43031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll deduction \$20 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	900.00
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 / 15

(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)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Anne B. King		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 8934 Roundwood Ct.		Transaction ID: SA11A1.5810	
City Dublin	State OH	Zip Code 43016	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25 biw- eekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 300.00		
Full Name (Last, First, Middle Initial) B. Orville R. Lyons, II		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 4848 St. Medan Drive		Transaction ID: SA11A1.5815	
City Westerville	State OH	Zip Code 43082	Amount of Each Receipt this Period 324.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$27 biw- eekly	
Name of Employer Motorists Mutual Insurance Co. Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 324.00		
Full Name (Last, First, Middle Initial) C. Thomas C. Ogg		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 10187 Chelton Wood		Transaction ID: SA11A1.5818	
City Powell	State OH	Zip Code 43085	Amount of Each Receipt this Period 480.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$40 biw- eekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Secretary Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ► **1104.00**

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 9 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Randolph A. Rudowicz		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 1026 Loch Ness Avenue		Transaction ID: SA11A1.5821
City Worthington	State OH	Zip Code 43085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Motorists Mutual Insurance Company	Occupation Manager	Payroll deduction \$25 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Karen L. Schwartz		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 1252 Pond Hollow Lane		Transaction ID: SA11A1.5822
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll deduction \$25 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Charles D. Stapleton		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 6900 Kindler Drive		Transaction ID: SA11A1.5824
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Motorists Mutual Insurance Company	Occupation Senior Vice President	Payroll deduction \$25 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	900.00
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 10 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)

MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Tamara A. Stephens		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 8818 Cooks Hill Road		Transaction ID: SA11A1.5825	
City Glenford	State OH	Zip Code 43739	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25 biw- eekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 300.00		
Full Name (Last, First, Middle Initial) B. James E. Vermilion		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 919 Byron Avenue		Transaction ID: SA11A1.5827	
City Columbus	State OH	Zip Code 43227	Amount of Each Receipt this Period 420.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$35 biw- eekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 420.00		
Full Name (Last, First, Middle Initial) C. Richard J. Walton		Date of Receipt M / D / Y 06 / 30 / 2005	
Mailing Address 3249 Scioto Run Blvd.		Transaction ID: SA11A1.5828	
City Hilliard	State OH	Zip Code 43028	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Payroll deduction \$25 biw- eekly	
Name of Employer Motorists Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ► **1020.00**

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

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Peter A. Weisenberger		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 7105 Lakebrook Blvd.		Transaction ID: SA11A1.5829
City	State	Zip Code
Columbus	OH	43235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Motorists Mutual Insurance Company	Occupation Vice President	Payroll deduction \$20 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Charles A. Wickert		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 5519 Medallion Drive W.		Transaction ID: SA11A1.5830
City	State	Zip Code
Westerville	OH	43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Motorists Mutual Insurance Company	Occupation Senior Vice President	Payroll deduction \$30 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Michael L. Wiseman		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 90 Timberknoll Loop		Transaction ID: SA11A1.5832
City	State	Zip Code
Powell	OH	43085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 420.00
Name of Employer Motorists Mutual Insurance Company	Occupation Treasurer	Payroll deduction \$35 bi-weekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	1020.00
TOTAL This Period (last page this line number only)	6048.00

**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 12 / 15

<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)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. NAMIC CAP Program		Transaction ID: SB23.5758 Date of Disbursement 01 / 03 / 2005	
Mailing Address 122 C Street, NW, Suite 540		Amount of Each Disbursement this Period 1500.00	
City Washington	State DC	Zip Code 20001	Category/ Type
Purpose of Disbursement Federal PAC			
Candidate Name			
Office Sought: House Senate President	Disbursement For: X Primary Other (specify) ▼	2005 General	
State: District			

Full Name (Last, First, Middle Initial) B. Pryce for Congress		Transaction ID: SB23.5785 Date of Disbursement 03 / 18 / 2005	
Mailing Address 145 East Rich Street		Amount of Each Disbursement this Period 1000.00	
City Columbus	State OH	Zip Code 43215	Category/ Type
Purpose of Disbursement Federal Political Contribution			
Candidate Name			
Office Sought: House Senate President	Disbursement For: X Primary Other (specify) ▼	2005 General	
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

**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 13 / 15

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Citizens for Geoffrey C. Smith		Transaction ID: SB29.5769 Date of Disbursement 05 / 03 / 2005	
Mailing Address 865 Macon Alley		Amount of Each Disbursement this Period 500.00	
City Columbus State OH Zip Code 43206	Purpose of Disbursement State Political Campaign Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2005 X Primary Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens for Hottinger		Transaction ID: SB29.5767 Date of Disbursement 04 / 18 / 2005	
Mailing Address 386 Sabreclutt Drive		Amount of Each Disbursement this Period 500.00	
City Newark State OH Zip Code 43055	Purpose of Disbursement State PAC Contribution Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2005 X Primary Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens for Jim Petro		Transaction ID: SB29.5778 Date of Disbursement 01 / 11 / 2005	
Mailing Address 211 South Fifth Street		Amount of Each Disbursement this Period 250.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement State Political Contribution Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: 2005 X Primary Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	1250.00
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 14 / 15

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial)
A. Husted for Ohio

Mailing Address 145 Sherbrooke Drive

City Kettering State OH Zip Code 45429

Purpose of Disbursement
State Political Contribution

Candidate Name

Office Sought: House Senate President
State: OH District

Disbursement For: Primary General
Other (specify) ▼

Transaction ID: SB29.5772
Date of Disbursement
06 / 14 / 2005

Amount of Each Disbursement this Period
4500.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. LIFE PAC

Mailing Address 100 South Third Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State PAC Contribution

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2005
X Primary General
Other (specify) ▼

Transaction ID: SB29.5783
Date of Disbursement
02 / 29 / 2005

Amount of Each Disbursement this Period
750.00

Category/
Type

Full Name (Last, First, Middle Initial)
C. Montgomery Campaign Committee

Mailing Address 211 South Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State Political Campaign

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2005
X Primary General
Other (specify) ▼

Transaction ID: SB29.5788
Date of Disbursement
04 / 29 / 2005

Amount of Each Disbursement this Period
500.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ► **5750.00**

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 / 15

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MOTORISTS MUTUAL INSURANCE COMPANY CIVIC FUND (MOTORISTS INSURANCE CIVIC FUND)

Full Name (Last, First, Middle Initial) A. Montgomery Campaign Committee		Transaction ID: SB29.5770 Date of Disbursement 05 / 06 / 2005	
Mailing Address 211 South Fifth Street		Amount of Each Disbursement this Period 250.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement State Political Contribution	Category/ Type	
Candidate Name		Office Sought: House Senate President	
Disbursement For: 2005 X Primary General Other (specify) ▼		State: District	

Full Name (Last, First, Middle Initial) B. OII PAC		Transaction ID: SB29.5782 Date of Disbursement 02 / 15 / 2005	
Mailing Address 172 East State Street P. O. Box B16		Amount of Each Disbursement this Period 50.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement State PAC Contribution	Category/ Type	
Candidate Name		Office Sought: House Senate President	
Disbursement For: 2005 X Primary General Other (specify) ▼		State: District	

Full Name (Last, First, Middle Initial) C. Republican Senate Campaign Committee		Transaction ID: SB29.5771 Date of Disbursement 05 / 17 / 2005	
Mailing Address 211 South Fifth Street		Amount of Each Disbursement this Period 2500.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement State Political Contribution	Category/ Type	
Candidate Name		Office Sought: House Senate President	
Disbursement For: 2005 X Primary General Other (specify) ▼		State: District	

SUBTOTAL of Disbursements This Page (optional)	2800.00
TOTAL This Period (last page this line number only)	9800.00