

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NAMIC PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="center">73825.90</td></tr></table>	73825.90
Y	Y	Y	Y									
2	0	0	7									
73825.90												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="center">73825.90</td></tr></table>	73825.90										
73825.90												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="center">87467.50</td></tr></table>	87467.50	<table border="1" style="width: 100%;"><tr><td align="center">87467.50</td></tr></table>	87467.50								
87467.50												
87467.50												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="center">161293.40</td></tr></table>	161293.40	<table border="1" style="width: 100%;"><tr><td align="center">161293.40</td></tr></table>	161293.40								
161293.40												
161293.40												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="center">48009.82</td></tr></table>	48009.82	<table border="1" style="width: 100%;"><tr><td align="center">48009.82</td></tr></table>	48009.82								
48009.82												
48009.82												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="center">113283.58</td></tr></table>	113283.58	<table border="1" style="width: 100%;"><tr><td align="center">113283.58</td></tr></table>	113283.58								
113283.58												
113283.58												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
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**

Write or Type Committee Name
NAMIC PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	45730.00	45730.00
(i) Itemized (use Schedule A)	19737.50	19737.50
(ii) Unitemized	65467.50	65467.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	22000.00	22000.00
(c) Other Political Committees (such as PACs)	87467.50	87467.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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))	87467.50	87467.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	87467.50	87467.50

DETAILED SUMMARY PAGE
of Disbursements

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.....	509.82	509.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	509.82	509.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47500.00	47500.00
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))..	48009.82	48009.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	48009.82	48009.82

DETAILED SUMMARY PAGE
of Disbursements

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)	87467.50	87467.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87467.50	87467.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	509.82	509.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	509.82	509.82

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 1493 Hunters Glen		Transaction ID: R7564
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 1493 Hunters Glen		Transaction ID: R7601
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 1493 Hunters Glen		Transaction ID: R7639
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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: (check only one)	PAGE 7 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 1493 Hunters Glen		Transaction ID: R7731	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation State Relations Manager	Aggregate Year-to-Date ▼ 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 1493 Hunters Glen		Transaction ID: R7781	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation State Relations Manager	Aggregate Year-to-Date ▼ 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 1493 Hunters Glen		Transaction ID: R7815	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation State Relations Manager	Aggregate Year-to-Date ▼ 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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: (check only one)	PAGE 8 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 1493 Hunters Glen		Transaction ID: R7859
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 1493 Hunters Glen		Transaction ID: R7933
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 1493 Hunters Glen		Transaction ID: R7996
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC State Relations Manager	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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: (check only one)	PAGE 9 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Neil Alldredge

Mailing Address 1493 Hunters Glen

City State Zip Code
Zionsville IN 46077

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

Name of Employer NAMIC Occupation
State Relations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2007

Transaction ID: R8077

Amount of Each Receipt this Period
25.00

Manual Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Neil Alldredge

Mailing Address 1493 Hunters Glen

City State Zip Code
Zionsville IN 46077

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

Name of Employer NAMIC Occupation
State Relations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2007

Transaction ID: R8157

Amount of Each Receipt this Period
25.00

Manual Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Neil Alldredge

Mailing Address 1493 Hunters Glen

City State Zip Code
Zionsville IN 46077

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

Name of Employer NAMIC Occupation
State Relations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2007

Transaction ID: R8190

Amount of Each Receipt this Period
25.00

Manual Deduction

SUBTOTAL of Receipts This Page (optional)	▶	75.00
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: (check only one)	PAGE 10 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 1493 Hunters Glen		Transaction ID: R8270	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation State Relations Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) B. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 01 / 05 / 2007	
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7565	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Senior VP - Member Svcs/Communications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2007	
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7602	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Senior VP - Member Svcs/Communications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	65.00
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 11 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7640
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7732
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7782
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 12 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7816
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7860
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7934
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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 13 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7997
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R8078
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R8158
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 14 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R8271
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Senior VP - Member Svcs/Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mr. David L. Anderson, CPCU, PFMM		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address PO Box 276		Transaction ID: R7728
City Canton State SD Zip Code 57013-0276	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Farm Mutual Insurance Co. of Lincoln C Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 760.00		

Full Name (Last, First, Middle Initial) C. Mr. David L. Anderson, CPCU, PFMM		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address PO Box 276		Transaction ID: R7958
City Canton State SD Zip Code 57013-0276	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Farm Mutual Insurance Co. of Lincoln C Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 760.00		

SUBTOTAL of Receipts This Page (optional)	620.00
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: (check only one)	PAGE 15 / 87
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. David L. Anderson, CPCU, PFMM		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2007	
Mailing Address PO Box 276		Transaction ID: R7959	
City State Zip Code Canton SD 57013-0276	Amount of Each Receipt this Period 160.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Farm Mutual Insurance Co. of Lincoln C	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00		

B. Full Name (Last, First, Middle Initial) Mr. Thomas E. Beach		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2007	
Mailing Address 170 South Independence Mall West		Transaction ID: R8217	
City State Zip Code Philadelphia PA 19106	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Mr. Donald Bender		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2007	
Mailing Address 2632 Northmont Dr.		Transaction ID: R8104	
City State Zip Code Blacklick OH 43004-8554	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer State Auto Insurance Comp-anies	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	910.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. John Bishop		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 1390 Picardae Court		Transaction ID: R7664	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Motorists Mutual Insurance Company	Occupation Chairman, President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. W.A. Bissette		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7	
Mailing Address The Curtis Center 170 S. Independence Mall West		Transaction ID: R8257	
City State Zip Code Philadelphia PA 19106-3388	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mr. James A. Blum, CPCU		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7	
Mailing Address 2107 Longleaf Drive		Transaction ID: R8297	
City State Zip Code Fort Wayne IN 46814-9519	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Brotherhood Mutual Insurance Company	Occupation Chairman & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
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: (check only one)	PAGE 17 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Stephen F. Boyd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 170 South Independence Mall West		Transaction ID: R8134
City State Zip Code Philadelphia PA 19106-3388	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Paul F. Brinker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 21250 Caris Rd.		Transaction ID: R7990
City State Zip Code Bowling Green OH 43402-9633	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Lime City Mutual Insurance Association	Occupation Secretary/Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R7568
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Federal Affairs Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	770.00
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: (check only one)	PAGE 18 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R7605
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R7643
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R7735
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 19 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007
Mailing Address 5290 Duke Street		Transaction ID: R7785
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 5290 Duke Street		Transaction ID: R7819
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 5290 Duke Street		Transaction ID: R7863
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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 20 / 87
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R7937
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation NAMIC Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R8000
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation NAMIC Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 5290 Duke Street		Transaction ID: R8081
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation NAMIC Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 21 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 5290 Duke Street		Transaction ID: R8161	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 5290 Duke Street		Transaction ID: R8193	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Marliiss Browder		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 5290 Duke Street		Transaction ID: R8274	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC Occupation Federal Affairs Representative	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 22 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. John A. Bykowski		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7
Mailing Address 2401 South Memorial Drive		Transaction ID: R7663
City State Zip Code Appleton WI 54915	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer SECURA Insurance, A Mutual Company	Occupation Chairman, President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Mr. Leon M. Cangiano, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 7
Mailing Address 433 Walnut Street		Transaction ID: R7538
City State Zip Code Brookline MA 02445-5917	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Norfolk & Dedham Group	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Jay W. Chadwick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address PO Box 7 601 State Street		Transaction ID: R7924
City State Zip Code Wyalusing PA 18853-0007	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Tuscarora Wayne Mutual Insurance Compa	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
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: (check only one)	PAGE 23 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R7569
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R7606
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

Full Name (Last, First, Middle Initial) C. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R7644
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 527 W 46th Street		Transaction ID: R7736	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 527 W 46th Street		Transaction ID: R7786	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) C. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 527 W 46th Street		Transaction ID: R7820	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 527 W 46th Street		Transaction ID: R7864	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 527 W 46th Street		Transaction ID: R7938	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) C. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 527 W 46th Street		Transaction ID: R8001	
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
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: (check only one)	PAGE 26 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R8082
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC President	Aggregate Year-to-Date ▼ 975.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R8162
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC President	Aggregate Year-to-Date ▼ 975.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 527 W 46th Street		Transaction ID: R8194
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC President	Aggregate Year-to-Date ▼ 975.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
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: (check only one)	PAGE 27 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 527 W 46th Street		Transaction ID: R8275	
City Indianapolis	State IN	Zip Code 46208-3605	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer NAMIC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) B. Mr. David N. Cote		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007	
Mailing Address 222 Ames Street		Transaction ID: R7805	
City Dedham	State MA	Zip Code 02026	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Norfolk & Dedham Group	Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Robert A. Cunningham		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2007	
Mailing Address P.O. Box 238		Transaction ID: R8123	
City Prairie Grove	State AR	Zip Code 72753	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northwest Arkansas Farmers Mutual Torn	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	575.00
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: (check only one)	PAGE 28 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7571
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Public Policy Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7608
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Public Policy Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7646
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation Public Policy Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 29 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7738
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Public Policy Director	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7788
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Public Policy Director	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7822
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Public Policy Director	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 87						
	(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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R7866	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R7940	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R8003	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R8084	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R8164	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R8196	
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Public Policy Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	60.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R8277
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Public Policy Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7572
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7609
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7647
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7739
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7789
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7823
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7867
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7941
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R8004
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R8085
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2007
Mailing Address 1838 Arrowwood Drive		Transaction ID: R8165
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 1838 Arrowwood Drive		Transaction ID: R8197	
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Vice President - Internal Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 1838 Arrowwood Drive		Transaction ID: R8278	
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Vice President - Internal Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Mr. Keith Escue		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 703 W. Poplar		Transaction ID: R7989	
City State Zip Code Rogers AR 72756-4443	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Farmers Mutual Insurance Company	Occupation Secretary/Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Michael L. Faron		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007
Mailing Address 222 Ames Street P.O. Box 9109		Transaction ID: R7806
City State Zip Code Dedham MA 02027-9109	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Norfolk & Dedham Group Manager, Commercial Lines Administrati	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Scott A. Figgins		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007
Mailing Address PO Box 2227		Transaction ID: R8298
City State Zip Code Fort Wayne IN 46801-2227	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Brotherhood Mutual Insurance Company	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Kurt Foley		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2007
Mailing Address 1510 North Elms Road		Transaction ID: R7928
City State Zip Code Flint MI 48532-2033	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Pioneer State Mutual Insurance Company VP, Marketing	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
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: (check only one)	PAGE 38 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Henry H. Gibbel		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7
Mailing Address 20 E. 4th Street		Transaction ID: R7672
City State Zip Code Lititz PA 17543-7007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Lititz Mutual Insurance Company	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Henry R. Gibbel		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7
Mailing Address 20 East Fourth Avenue		Transaction ID: R7671
City State Zip Code Lititz PA 17543	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Livingston Mutual Insurance Company	Occupation Sr. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. E. Bulkeley Griswold		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 40		Transaction ID: R8314
City State Zip Code Norwich CT 06360	Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer New London County Insurance Companies	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	760.00
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: (check only one)	PAGE 39 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Clarence Guinn, CPA

Mailing Address P.O. Box 489

City State Zip Code
Rogers AR 72757

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

Name of Employer
Farmers Mutual Insurance Company

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 7

Transaction ID: R7626

Amount of Each Receipt this Period
1000.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Gerald J. Healy

Mailing Address The Curtis Center, Independence Sq

City State Zip Code
Philadelphia PA 19106

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

Name of Employer
Pennsylvania Lumbermens Mutual Insuran

Occupation
Vice President - Field Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 9 / 2 0 0 7

Transaction ID: R8135

Amount of Each Receipt this Period
1000.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Stuart C. Henderson

Mailing Address PO Box 1463

City State Zip Code
Minneapolis MN 55440-1463

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

Name of Employer
Western National Mutual Insurance Comp

Occupation
President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: R8030

Amount of Each Receipt this Period
500.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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: (check only one)	PAGE 40 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. John Hill		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 7	
Mailing Address 1 Park Avenue		Transaction ID: R7719	
City State Zip Code New York NY 10016		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Occupation Magna Carta Companies Chief Financial Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

B. Full Name (Last, First, Middle Initial) Mr. Donald J. Hughes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 507 Lakeview Box 143		Transaction ID: R8325	
City State Zip Code Lake Benton MN 56149		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Occupation Hope Mutual Insurance Company Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Judy S. Jackson		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7	
Mailing Address 48 Great Hillwood Road		Transaction ID: R8311	
City State Zip Code Moodus CT 06469		Amount of Each Receipt this Period 550.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Occupation New London County Mutual Insurance Com President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	3300.00
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: (check only one)	PAGE 41 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Judy S. Jackson		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007		
Mailing Address 48 Great Hillwood Road		Transaction ID: R8322		
City State Zip Code Moodus CT 06469	Amount of Each Receipt this Period 100.00		Check	
FEC ID number of contributing federal political committee. C				
Name of Employer New London County Mutual Insurance Com	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00			

Full Name (Last, First, Middle Initial) B. Mr. James J. Kennedy		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2007		
Mailing Address 1475 Lighthouse Ridge Road		Transaction ID: R7927		
City State Zip Code Marion OH 43302	Amount of Each Receipt this Period 1000.00		Check	
FEC ID number of contributing federal political committee. C				
Name of Employer Ohio Mutual Insurance Gro-up	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) C. Mr. Steve Knutson		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007		
Mailing Address 30 Molly Lane		Transaction ID: R8300		
City State Zip Code Esko MN 55733	Amount of Each Receipt this Period 250.00		Check	
FEC ID number of contributing federal political committee. C				
Name of Employer RAM Mutual Insurance Comp-any	Occupation Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
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: (check only one)	PAGE 42 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Michael Kobane		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2007
Mailing Address PO Box 834		Transaction ID: R7888
City State Zip Code Atwater CA 95301-0834	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Merced Mutual Insurance Company	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Mr. J. William Lee		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2007
Mailing Address The Curtis Center, Independence Sq		Transaction ID: R8133
City State Zip Code Philadelphia PA 19106	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Mr. Joe Liddle		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007
Mailing Address 2523 Meadow Creek Road		Transaction ID: R8025
City State Zip Code Galax VA 24333	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Grayson-Carroll-Wythe Mutual Insurance	Occupation Secretary/Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Gerard T. McDermott		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 7
Mailing Address 67 Meadow Street		Transaction ID: R7537
City State Zip Code Norwood MA 02062-5647	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Norfolk & Dedham Group Executive Vice President	Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Mr. Joseph M. McGurrin		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7
Mailing Address 170 South Independence Mall West		Transaction ID: R7844
City State Zip Code Philadelphia PA 19106-3388	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Assistant V.P. - Information Systems	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mr. Stan W. McNaughton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address 4425 East Lake Goodwin Road		Transaction ID: R8186
City State Zip Code Stanwood WA 98292	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation PEMCO Insurance Companies President	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	1300.00
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: (check only one)	PAGE 44 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Arthur L. Meadows		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2007
Mailing Address Route 7 Box 113 B		Transaction ID: R7972
City Fairmont	State WV	Zip Code 26554-8915
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Pan Handle Farmers Mutual Insurance Co	Occupation President & CEO	Credit Card
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Tricia A. Mickley, CPA		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007
Mailing Address PO Box 31		Transaction ID: R8027
City Mt. Carroll	State IL	Zip Code 61053-0031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mt. Carroll Mutual Fire Insurance Comp	Occupation Manager	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Stephen H. Miller, CPCU		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2007
Mailing Address 3944 - 259th Avenue, SE		Transaction ID: R8121
City Issaquah	State WA	Zip Code 98029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer PEMCO Insurance Companies	Occupation Vice President & COO	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Joel P. Murray		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 222 Ames Street P.O. Box 9109		Transaction ID: R8107
City State Zip Code Dedham MA 02027-9109	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Norfolk & Dedham Group	Occupation Marketing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7
Mailing Address 1405 Ruffner Road		Transaction ID: R7841
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

Full Name (Last, First, Middle Initial) C. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 1405 Ruffner Road		Transaction ID: R7947
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C		Manual Deduction
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

SUBTOTAL of Receipts This Page (optional) ▶	612.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 1405 Ruffner Road		Transaction ID: R8009
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

Full Name (Last, First, Middle Initial) B. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 1405 Ruffner Road		Transaction ID: R8091
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

Full Name (Last, First, Middle Initial) C. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 1405 Ruffner Road		Transaction ID: R8172
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

SUBTOTAL of Receipts This Page (optional) ▶	337.50
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 47 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 1405 Ruffner Road		Transaction ID: R8204	
City State Zip Code Alexandria VA 22302		Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00		

Full Name (Last, First, Middle Initial) B. Mr. Carl M. Parks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 1405 Ruffner Road		Transaction ID: R8285	
City State Zip Code Alexandria VA 22302		Amount of Each Receipt this Period 112.50	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00		

Full Name (Last, First, Middle Initial) C. Ms. Sandra G. Parrillo		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address P.O. Box 6066		Transaction ID: R7923	
City State Zip Code Providence RI 02940-6066		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Providence Mutual Fire In- surance Compa	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	725.00
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: (check only one)	PAGE 48 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. John A. Paul		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007
Mailing Address 40962 Brothers Ave		Transaction ID: R7807
City State Zip Code Henderson IA 51541-4048	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Western Iowa Mutual Insurance Associat	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Mr. John A. Paul		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2007
Mailing Address 40962 Brothers Ave		Transaction ID: R8102
City State Zip Code Henderson IA 51541-4048	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Western Iowa Mutual Insurance Associat	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregory L. Petrini		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2007
Mailing Address 187 Rosemary Street		Transaction ID: R7720
City State Zip Code Needham MA 02494-3239	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Norfolk & Dedham Group	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
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 49 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Robert T. Ramsdell, CPCU		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address 101 High Street		Transaction ID: R8320	
City State Zip Code Norwich CT 06360-5605		Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Thames Insurance Company, Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

B. Full Name (Last, First, Middle Initial) Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 01 / 05 / 2007	
Mailing Address 13400 North White Cloud Court		Transaction ID: R7578	
City State Zip Code Camby IN 46113-8708		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer NAMIC		Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2007	
Mailing Address 13400 North White Cloud Court		Transaction ID: R7616	
City State Zip Code Camby IN 46113-8708		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer NAMIC		Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R7653
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R7745
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R7795
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 13400 North White Cloud Court		Transaction ID: R7829
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 13400 North White Cloud Court		Transaction ID: R7873
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 13400 North White Cloud Court		Transaction ID: R7948
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R8010
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R8092
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R8173
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R8205
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 13400 North White Cloud Court		Transaction ID: R8286
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Ms. Janey L. Repensek		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 4668 Eastern Avenue N		Transaction ID: R8254
City State Zip Code Seattle WA 98103	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Mutual of Enumclaw Insurance	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. L. Gerald Roach, CPCU, FLMI		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2007	
Mailing Address 4027 Monument Ave.		Transaction ID: R8140	
City Richmond	State VA	Zip Code 23230-3907	Amount of Each Receipt this Period 1165.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Mutual Assurance Society of Virginia	Occupation President	Aggregate Year-to-Date ▼ 1165.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y Y 01 / 05 / 2007	
Mailing Address 727 3rd Street NE		Transaction ID: R7579	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2007	
Mailing Address 727 3rd Street NE		Transaction ID: R7617	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	1205.00
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: (check only one)	PAGE 55 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R7654
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R7746
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R7796
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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 56 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 727 3rd Street NE		Transaction ID: R7830
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 727 3rd Street NE		Transaction ID: R7874
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 727 3rd Street NE		Transaction ID: R7949
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R8011
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R8093
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R8175
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer Occupation NAMIC Senior Federal Affairs Director	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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: (check only one)	PAGE 58 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R8207
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B. Full Name (Last, First, Middle Initial) Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 727 3rd Street NE		Transaction ID: R8288
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Mr. Randy Rudowicz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 1026 Loch Ness		Transaction ID: R8103
City State Zip Code Worthington OH 43085	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Motorists Mutual Insurance Company	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Timothy B. Salge		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2007
Mailing Address 1217 Gardenia		Transaction ID: R7969
City State Zip Code New Braunfels TX 78130-5905	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Farmers Mutual Fire Insur. Assoc. of C	Occupation President/General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Gerald P. Schmidt		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2007
Mailing Address 1460 Wells Street		Transaction ID: R7843
City State Zip Code Enumclaw WA 98022-3003	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Mutual of Enumclaw Insurance	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Mr. Dale R. Schuh		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007
Mailing Address 1800 N. Point Drive		Transaction ID: R8309
City State Zip Code Stevens Point WI 54481-1253	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Sentry Insurance a Mutual Company	Occupation Chairman/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
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: (check only one)	PAGE 60 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Mr. William R. Scrafford

Mailing Address 6504 State Route 32

City Greenville State NY Zip Code 12083-0040

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

Name of Employer Eastern Mutual Insurance Company
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	0	7

Transaction ID: R7887

Amount of Each Receipt this Period
250.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Martin C. Shapiro

Mailing Address 101 High Street
PO Box 40

City Norwich State CT Zip Code 06360

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

Name of Employer New London County Insurance Companies
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	7

Transaction ID: R8310

Amount of Each Receipt this Period
260.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Thomas J. Shaw

Mailing Address 120 S. main

City Liberal State MO Zip Code 64762-0022

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

Name of Employer Barton County Mutual Insurance Company
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	0	7

Transaction ID: R7925

Amount of Each Receipt this Period
250.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	760.00
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: (check only one)	PAGE 61 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Christopher G. Shipe, CPCU, AIT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 196 Mira Maple Drive		Transaction ID: R7920
City State Zip Code Martinsburg WV 25401	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Loudoun Mutual Insurance Company	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Mr. Franklin P. Smith, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 40		Transaction ID: R8321
City State Zip Code Norwich CT 06360	Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer New London County Insurance Companies	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 7
Mailing Address 21 Riverview Drive		Transaction ID: R7536
City State Zip Code West Trenton NJ 08628-2617	Amount of Each Receipt this Period 650.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.00	

SUBTOTAL of Receipts This Page (optional) ▶	1160.00
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: (check only one)	PAGE 62 / 87
	<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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 7	
Mailing Address 21 Riverview Drive		Transaction ID: R7629	
City State Zip Code West Trenton NJ 08628-2617		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00	

Full Name (Last, First, Middle Initial) B. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 21 Riverview Drive		Transaction ID: R7708	
City State Zip Code West Trenton NJ 08628-2617		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00	

Full Name (Last, First, Middle Initial) C. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7	
Mailing Address 21 Riverview Drive		Transaction ID: R7848	
City State Zip Code West Trenton NJ 08628-2617		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00	

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 21 Riverview Drive		Transaction ID: R8039
City State Zip Code West Trenton NJ 08628-2617	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.00	

Full Name (Last, First, Middle Initial) B. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 21 Riverview Drive		Transaction ID: R8148
City State Zip Code West Trenton NJ 08628-2617	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.00	

Full Name (Last, First, Middle Initial) C. Mr. John Kevin Smith		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address 21 Riverview Drive		Transaction ID: R8244
City State Zip Code West Trenton NJ 08628-2617	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.00	

SUBTOTAL of Receipts This Page (optional) ▶	240.00
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: (check only one)	PAGE 64 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. David Sommer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 305 Hickory Hollow Lane		Transaction ID: R8124
City State Zip Code Brenham TX 77833-9238	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Germania Farm Mutual Insurance Associa	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert H. Steele		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 40		Transaction ID: R8318
City State Zip Code Norwich CT 06360	Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer New London County Insurance Companies	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul G. Stueven		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1285 Highway 15 South		Transaction ID: R7919
City State Zip Code Fairmont MN 56031-4461	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Fairmont Farmers Mutual Insurance Comp	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1760.00
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: (check only one)	PAGE 65 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Douglas M. Sullivan, CIC, PFMM		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 728 Meadowlark Court		Transaction ID: R7985
City State Zip Code Geneseo IL 61254-1126	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Svea Mutual Insurance Company Occupation Secretary-Treasurer	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7583
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 3601 Vincennes Road		Transaction ID: R7621
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	340.00
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: (check only one)	PAGE 66 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R7658	
City State Zip Code Indianapolis IN 46268-0700		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer Occupation NAMIC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

B. Full Name (Last, First, Middle Initial) Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R7750	
City State Zip Code Indianapolis IN 46268-0700		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer Occupation NAMIC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 3601 Vincennes Road		Transaction ID: R7800	
City State Zip Code Indianapolis IN 46268-0700		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Manual Deduction	
Name of Employer Occupation NAMIC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	60.00
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 67 / 87
(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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Tim Sullivan

Mailing Address 3601 Vincennes Road

City State Zip Code
Indianapolis IN 46268-0700

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NAMIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
03 / 16 / 2007

Transaction ID: R7834

Amount of Each Receipt this Period
20.00

Manual Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Tim Sullivan

Mailing Address 3601 Vincennes Road

City State Zip Code
Indianapolis IN 46268-0700

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NAMIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
03 / 30 / 2007

Transaction ID: R7878

Amount of Each Receipt this Period
20.00

Manual Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Tim Sullivan

Mailing Address 3601 Vincennes Road

City State Zip Code
Indianapolis IN 46268-0700

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NAMIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
04 / 13 / 2007

Transaction ID: R7953

Amount of Each Receipt this Period
20.00

Manual Deduction

SUBTOTAL of Receipts This Page (optional)	60.00
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: (check only one)	PAGE 68 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R8015	
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer Occupation NAMIC	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R8097	
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer Occupation NAMIC	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2007	
Mailing Address 3601 Vincennes Road		Transaction ID: R8179	
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer Occupation NAMIC	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	60.00
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 69 / 87
(check only one)
 11a 11b 11c 12
 13 14 15 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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Tim Sullivan

Mailing Address 3601 Vincennes Road

City State Zip Code
Indianapolis IN 46268-0700

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

Name of Employer Occupation
NAMIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 08 / 2007

Transaction ID: R8211

Amount of Each Receipt this Period
20.00

Manual Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Tim Sullivan

Mailing Address 3601 Vincennes Road

City State Zip Code
Indianapolis IN 46268-0700

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

Name of Employer Occupation
NAMIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 22 / 2007

Transaction ID: R8292

Amount of Each Receipt this Period
20.00

Manual Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Christopher P. Taft

Mailing Address 188 Arrowhead Way

City State Zip Code
Clinton NY 13323

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

Name of Employer Occupation
Preferred Mutual Insurance Company Executive Vice President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 24 / 2007

Transaction ID: R7986

Amount of Each Receipt this Period
1000.00

Check

SUBTOTAL of Receipts This Page (optional) ► **1040.00**

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: (check only one)	PAGE 70 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Julie Thompson, PFMM		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2007	
Mailing Address 914 Alden Drive		Transaction ID: R7842	
City State Zip Code Auburn NE 68305-3021	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Check	
Name of Employer German Mutual Insurance Association of	Occupation Secretary/Treasurer/ Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Leslie L. Tintzman, PFMM		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2007	
Mailing Address 605 Willow Creek Road		Transaction ID: R8122	
City State Zip Code Corvallis MT 59828-9473	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Bitterroot Farm Mutual Insurance, Inc.	Occupation Manager/Secretary/Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Douglas J. Wacek		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2007	
Mailing Address PO Box 158		Transaction ID: R7921	
City State Zip Code Montpelier VT 05601-0158	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Union Mutual Fire Group	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	800.00
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: (check only one)	PAGE 71 / 87
	<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	

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert A. Wadsworth, CIC,CPCU		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 7 New Berlin Heights P.O. Box 175		Transaction ID: R7883
City State Zip Code New Berlin NY 13411	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Preferred Mutual Insurance Company Receipt For:	Occupation Chairman/President/CEO Aggregate Year-to-Date ▼ 2500.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Terry H. Wendorff, CPCU		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address PO Box 7988		Transaction ID: R7922
City State Zip Code Madison WI 53707-7988	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Check
Name of Employer Wisconsin Reinsurance Corporation Receipt For:	Occupation President/CEO Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Wayne F. White, CPA		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 78 Hill Farm Road		Transaction ID: R7839
City State Zip Code Conway AR 72032-9041	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C		Credit Card
Name of Employer Home Mutual Fire Insurance Company Receipt For:	Occupation President/Chairman Aggregate Year-to-Date ▼ 2500.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
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: (check only one)	PAGE 72 / 87
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Wayne F. White, CPA		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2007	
Mailing Address 78 Hill Farm Road		Transaction ID: R8324	
City State Zip Code Conway AR 72032-9041		Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Home Mutual Fire Insurance Company Occupation President/Chairman			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Mr. Michael A. Yeager		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007	
Mailing Address 1690 Scherersville Road		Transaction ID: R7811	
City State Zip Code Allentown PA 18104-9779		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Lehigh Mutual Insurance Company Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Mr. Michael A. Yeager		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2007	
Mailing Address 1690 Scherersville Road		Transaction ID: R8184	
City State Zip Code Allentown PA 18104-9779		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Lehigh Mutual Insurance Company Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
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 73 / 87
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Michael A. Yeager		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 1690 Scherersville Road		Transaction ID: R8308
City State Zip Code Allentown PA 18104-9779	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Lehigh Mutual Insurance Company	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Mr. Jerry Zenke, PFMM		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 708		Transaction ID: R7889
City State Zip Code Houston MN 55943-0708	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Mound Prairie Mutual Insurance Company	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	45730.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 87		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Farmers Mutual Hail PAC Mailing Address 2323 Grand Avenue City State Zip Code Des Moines IA 50312 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 Transaction ID: R8126 Amount of Each Receipt this Period 2000.00 Check
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

B. Full Name (Last, First, Middle Initial) Motorists Mutual Insurance Company Civic Fund Mailing Address 471 East Broad Street City State Zip Code Columbus OH 43215-3861 FEC ID number of contributing federal political committee. C C00336834		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7 Transaction ID: R7665 Amount of Each Receipt this Period 5000.00 Check
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Secura PAC Mailing Address 2401 S. Memorial Drive PO Box 819 City State Zip Code Appleton WI 54912 FEC ID number of contributing federal political committee. C C00343384		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: R7840 Amount of Each Receipt this Period 2500.00 Check
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional)	9500.00
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 75 / 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Shelter Insurance Federal PAC

Mailing Address 1817 W. Broadway

City State Zip Code
Columbia MO 65218

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: R7995

Amount of Each Receipt this Period
5000.00

Check

B. Full Name (Last, First, Middle Initial)
State Auto Employees Fed PAC Committee

Mailing Address 518 E. Broad Street

City State Zip Code
Columbus OH 43215

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: R7994

Amount of Each Receipt this Period
5000.00

Check

C. Full Name (Last, First, Middle Initial)
Westfield Federal Employees PAC

Mailing Address PO Box 5001

City State Zip Code
Westfield Center OH 44251

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: R7932

Amount of Each Receipt this Period
2500.00

Check

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

TOTAL This Period (last page this line number only) ► **22000.00**

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 76 / 87

<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

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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. National City Bank		Transaction ID: D795 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 44.82
City Indianapolis State IN Zip Code 46260	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

Full Name (Last, First, Middle Initial) B. National City Bank		Transaction ID: D800 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 55.00
City Indianapolis State IN Zip Code 46260	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

Full Name (Last, First, Middle Initial) C. National City Bank		Transaction ID: D801 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 140.85
City Indianapolis State IN Zip Code 46260	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	240.67
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 77 / 87

<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. National City Bank		Transaction ID: D809 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 150.20
City Indianapolis State IN Zip Code 46260	Category/ Type	
Purpose of Disbursement Bank Charges Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. National City Bank		Transaction ID: D820 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 51.21
City Indianapolis State IN Zip Code 46260	Category/ Type	
Purpose of Disbursement Bank Charges Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National City Bank		Transaction ID: D822 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 1417 W 86th St		Amount of Each Disbursement this Period 67.74
City Indianapolis State IN Zip Code 46260	Category/ Type	
Purpose of Disbursement Bank Charges Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	269.15
TOTAL This Period (last page this line number only) ▶	509.82

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)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Boren for Congress		Transaction ID: D797 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 149		Amount of Each Disbursement this Period 1000.00
City Okemah	State OK	
Zip Code 74859		
Purpose of Disbursement Contr.		
Candidate Name Daniel Boren		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK District: 02		

Full Name (Last, First, Middle Initial) B. Brown-Waite for Congress		Transaction ID: D807 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 2501 Wisconsin Ave #304		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20007		
Purpose of Disbursement Contr.		
Candidate Name Virginia Brown-Waite		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 05		

Full Name (Last, First, Middle Initial) C. Cantor for Congress		Transaction ID: D803 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address PO Box 17813		Amount of Each Disbursement this Period 1000.00
City Richmond	State VA	
Zip Code 23226		
Purpose of Disbursement Contr.		
Candidate Name Eric I. Cantor		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 07		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Citizens for Bunning		Transaction ID: D793 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 1717 Dixie Highway Suite 180		Amount of Each Disbursement this Period 1000.00
City Ft Wright State KY Zip Code 41011	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jim Bunning		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens for Gillmor		Transaction ID: D787 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address P.O. Box 150		Amount of Each Disbursement this Period 2500.00
City Old Fort State OH Zip Code 44861	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Paul E. Gillmor		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dreier for Congress		Transaction ID: D816 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address P.O. Box 505		Amount of Each Disbursement this Period 1000.00
City Upland State CA Zip Code 91785	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name David Dreier		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Freedom Fund PAC		Transaction ID: D808 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 128 North Columbus Street		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement Contr. Freedom Fund PAC	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Clay Shaw		Transaction ID: D825 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 2600 NE 14th. Street Causeway		Amount of Each Disbursement this Period -1000.00
City Fort Lauderdale State FL Zip Code 33303		
Purpose of Disbursement Returned Check #1111 dated 10/10/2006	Category/ Type	
Candidate Name E. Clay Shaw, Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

for E. Clay Shaw, Jr. (FL-22-R).

Full Name (Last, First, Middle Initial) C. Friends of Dave Reichert		Transaction ID: D814 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address PO Box 53322		Amount of Each Disbursement this Period 1000.00
City Bellevue State WA Zip Code 98015		
Purpose of Disbursement Contr.	Category/ Type	
Candidate Name David George Reichert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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)

<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Friends of Jeb Hensarling		Transaction ID: D815 Date of Disbursement 06 / 05 / 2007
Mailing Address PO Box 820504		Amount of Each Disbursement this Period 1000.00
City Dallas State TX Zip Code 75382	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jeb Hensarling		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Jeb Hensarling		Transaction ID: D818 Date of Disbursement 06 / 20 / 2007
Mailing Address PO Box 820504		Amount of Each Disbursement this Period 1500.00
City Dallas State TX Zip Code 75382	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jeb Hensarling		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of John Tanner		Transaction ID: D788 Date of Disbursement 02 / 20 / 2007
Mailing Address PO Box 1994		Amount of Each Disbursement this Period 2500.00
City Union City State TN Zip Code 38281	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name John S. Tanner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
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)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Growth & Prosperity PAC		Transaction ID: D790 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Contr. Growth & Prosperity PAC Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Judy Biggert for Congress		Transaction ID: D813 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 637		Amount of Each Disbursement this Period 1000.00
City Hinsdale State IL Zip Code 60522	Purpose of Disbursement Contr. Candidate Name Judy Biggert Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Klein for Congress		Transaction ID: D798 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 10 G Street, NE Suite 470		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Contr. Candidate Name Ron Klein Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Manzullo for Congress		Transaction ID: D792 Date of Disbursement 03 / 02 / 2007
Mailing Address PO Box 16021		Amount of Each Disbursement this Period 1500.00
City Alexandria	State VA	
Zip Code 22302		
Purpose of Disbursement Contr.		
Candidate Name Donald A. Manzullo		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 16		

Full Name (Last, First, Middle Initial) B. McConnell Senate Committee '08		Transaction ID: D791 Date of Disbursement 03 / 02 / 2007
Mailing Address 400 North Capital Street, NW Suite 585		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20001		
Purpose of Disbursement Contr.		
Candidate Name Mitch McConnell		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District:		

Full Name (Last, First, Middle Initial) C. McConnell Senate Committee '08		Transaction ID: D805 Date of Disbursement 05 / 08 / 2007
Mailing Address 400 North Capital Street, NW Suite 585		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20001		
Purpose of Disbursement Contr.		
Candidate Name Mitch McConnell		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
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)

<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. McHenry for Congress		Transaction ID: D802 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address P.O. Box 1406		Amount of Each Disbursement this Period 1000.00	
City Hickory	State NC	Zip Code 28603	Category/ Type
Purpose of Disbursement Contr.		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Patrick T. McHenry			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 10		

Full Name (Last, First, Middle Initial) B. Pennsylvanians for Kanjorski		Transaction ID: D784 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 126 South Franklin Street		Amount of Each Disbursement this Period 1000.00	
City Wilkes-Barre	State PA	Zip Code 18701	Category/ Type
Purpose of Disbursement Contr.		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Paul E. Kanjorski			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 11		

Full Name (Last, First, Middle Initial) C. Price for Congress		Transaction ID: D812 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7	
Mailing Address P.O. Box 425		Amount of Each Disbursement this Period 1000.00	
City Roswell	State GA	Zip Code 30077	Category/ Type
Purpose of Disbursement Contr.		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Thomas E. Price, M.D.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 06		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Pryce for Congress		Transaction ID: D786 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 145 E. Rich Street Second Floor		Amount of Each Disbursement this Period 2500.00
City Columbus State OH Zip Code 43215		
Purpose of Disbursement Contr.	Category/ Type	
Candidate Name Deborah Pryce		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Putnam for Congress		Transaction ID: D785 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address PO Box 2257		Amount of Each Disbursement this Period 1000.00
City Bartow State FL Zip Code 33831		
Purpose of Disbursement Contr.	Category/ Type	
Candidate Name Adam H. Putnam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Scott Garrett for Congress		Transaction ID: D806 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 217 Third St. SE		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20003		
Purpose of Disbursement Contr.	Category/ Type	
Candidate Name Scott Garrett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Sires for Congress		Transaction ID: D821 Date of Disbursement 06 / 27 / 2007
Mailing Address PO Box 300		Amount of Each Disbursement this Period 1000.00
City West New York	State NJ	
Zip Code 07093		
Purpose of Disbursement Contr.		
Candidate Name Albio Sires		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 13	

Full Name (Last, First, Middle Initial) B. The Blue Dog PAC		Transaction ID: D794 Date of Disbursement 03 / 02 / 2007
Mailing Address 236 Massachusetts Ave., NE Suite 508		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20002		
Purpose of Disbursement Contr. Blue Dog Coalition (DC-D)		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. The Freedom Project		Transaction ID: D804 Date of Disbursement 04 / 23 / 2007
Mailing Address 509 7th Street, NW Third Floor		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20004		
Purpose of Disbursement Contr. Freedom Project, The		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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)

<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Tiberi for Congress		Transaction ID: D796 Date of Disbursement
Mailing Address 2021 East Dublin Granville Road Suite 2000		<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
City Columbus	State OH	Zip Code 43229
Purpose of Disbursement Contr.		Amount of Each Disbursement this Period
Candidate Name Patrick J. Tiberi		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 12	

Full Name (Last, First, Middle Initial) B. Tom Feeney for Congress		Transaction ID: D817 Date of Disbursement
Mailing Address 1420 Alafaya Trail #103		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
City Oviedo	State FL	Zip Code 32765
Purpose of Disbursement Contr.		Amount of Each Disbursement this Period
Candidate Name Tom Feeney		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 24	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="47500.00"/>