

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ONE GEICO PLAZA

Check if different than previously reported. (ACC) WASHINGTON DC 20076

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00343749

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

- (Choose One)
- (a) Quarterly Reports:
 - April 15 Quarterly Report (Q1)
 - July 15 Quarterly Report (Q2)
 - October 15 Quarterly Report (Q3)
 - January 31 Year-End Report (YE)
 - July 31 Mid-Year Report (Non-election Year Only) (MY)
 - Termination Report (TER)

- (b) Monthly Report Due On:
 - Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

 Election on [MM] / [DD] / [YYYY] in the State of []

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

- General (30G)
- Runoff (30R)
- Special (30S)

 Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 04 / 01 / 2014 through [MM] / [DD] / [YYYY] 06 / 30 / 2014

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

Type or Print Name of Treasurer Michael Campbell

Signature of Treasurer Michael Campbell [Electronically Filed] Date 07 / 09 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="46827.52"/>	<input type="text" value="46827.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="50994.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7992.00"/>	<input type="text" value="14159.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="58986.52"/>	<input type="text" value="60986.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="500.00"/>	<input type="text" value="2500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="58486.52"/>	<input type="text" value="58486.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4890.00	6605.00
(ii) Unitemized	3102.00	7554.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7992.00	14159.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7992.00	14159.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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 Transfers (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))..... ▶	7992.00	14159.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7992.00	14159.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	2500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	500.00	2500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	2500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7992.00	14159.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7992.00	14159.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 18
(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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Shawn Burklin

Mailing Address 11072 Ipai Court

City San Diego State CA Zip Code 92127

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

Name of Employer GEICO Occupation RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.25756

Amount of Each Receipt this Period
600.00

Individual Contribution

Full Name (Last, First, Middle Initial)
B. Martha Furnas

Mailing Address 5318 N Fairway Heights Dr

City Tucson State AZ Zip Code 85749-7134

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

Name of Employer GEICO Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1055.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.25764

Amount of Each Receipt this Period
1000.00

Individual Contribution

Full Name (Last, First, Middle Initial)
C. Martha Furnas

Mailing Address 5318 N Fairway Heights Dr

City Tucson State AZ Zip Code 85749-7134

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

Name of Employer GEICO Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1065.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.25534

Amount of Each Receipt this Period
10.00

Payroll deduction \$5.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ **1610.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Seth M. Ingall
Full Name (Last, First, Middle Initial)

Mailing Address 8121 Autumn Gates Ln

City Bethesda State MD Zip Code 20817-4117

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

Name of Employer GEICO Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.25544

Amount of Each Receipt this Period
60.00

Payroll deduction \$30.00 biweekly

B. Seth M. Ingall
Full Name (Last, First, Middle Initial)

Mailing Address 8121 Autumn Gates Ln

City Bethesda State MD Zip Code 20817-4117

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

Name of Employer GEICO Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : SA11AI.25545

Amount of Each Receipt this Period
60.00

Payroll deduction \$30.00 biweekly

C. Seth M. Ingall
Full Name (Last, First, Middle Initial)

Mailing Address 8121 Autumn Gates Ln

City Bethesda State MD Zip Code 20817-4117

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

Name of Employer GEICO Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.25546

Amount of Each Receipt this Period
60.00

Payroll deduction \$30.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 3495 Pleasant Grove Drive

City Ijamsville	State MD	Zip Code 21754-9034
--------------------	-------------	------------------------

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

Name of Employer GEICO	Occupation Director
---------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2014
Transaction ID : SA11AI.25568

Amount of Each Receipt this Period
40.00

Payroll deduction \$20.00 biweekly

B. Paul Lavrey
Full Name (Last, First, Middle Initial)

Mailing Address 3495 Pleasant Grove Drive

City Ijamsville	State MD	Zip Code 21754-9034
--------------------	-------------	------------------------

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

Name of Employer GEICO	Occupation Director
---------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2014
Transaction ID : SA11AI.25569

Amount of Each Receipt this Period
40.00

Payroll deduction \$20.00 biweekly

C. Scott Edward Markel
Full Name (Last, First, Middle Initial)

Mailing Address 514 Waverly Park Drive

City Macon	State GA	Zip Code 31210-7571
---------------	-------------	------------------------

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

Name of Employer GEICO	Occupation Reg VP
---------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2014
Transaction ID : SA11AI.25582

Amount of Each Receipt this Period
50.00

Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Scott Edward Markel
 Full Name (Last, First, Middle Initial)
 Mailing Address 514 Waverly Park Drive
 City Macon State GA Zip Code 31210-7571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation Reg VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 22 / 2014
Transaction ID : SA11AI.25583
 Amount of Each Receipt this Period 50.00
 Payroll deduction \$25.00 biweekly

B. Scott Edward Markel
 Full Name (Last, First, Middle Initial)
 Mailing Address 514 Waverly Park Drive
 City Macon State GA Zip Code 31210-7571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation Reg VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 19 / 2014
Transaction ID : SA11AI.25584
 Amount of Each Receipt this Period 50.00
 Payroll deduction \$25.00 biweekly

C. John W McCutcheon
 Full Name (Last, First, Middle Initial)
 Mailing Address 19218 Tattershall Drive
 City Germantown State MD Zip Code 20874-6246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 22 / 2014
Transaction ID : SA11AI.25601
 Amount of Each Receipt this Period 40.00
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John W McCutcheon
 Full Name (Last, First, Middle Initial)
 Mailing Address 19218 Tattershall Drive
 City Germantown State MD Zip Code 20874-6246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 19 / 2014
Transaction ID : SA11AI.25602
 Amount of Each Receipt this Period 40.00
 Payroll deduction \$20.00 biweekly

B. Paul W Measley
 Full Name (Last, First, Middle Initial)
 Mailing Address 9539 E. Surprise Canyon Ct.
 City Tucson State AZ Zip Code 85748-3279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation Reg Liab Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 22 / 2014
Transaction ID : SA11AI.25613
 Amount of Each Receipt this Period 40.00
 Payroll deduction \$20.00 biweekly

C. Paul W Measley
 Full Name (Last, First, Middle Initial)
 Mailing Address 9539 E. Surprise Canyon Ct.
 City Tucson State AZ Zip Code 85748-3279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation Reg Liab Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 19 / 2014
Transaction ID : SA11AI.25614
 Amount of Each Receipt this Period 40.00
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Robert Miller
Full Name (Last, First, Middle Initial)

Mailing Address 3025 Amherst Avenue

City Dallas State TX Zip Code 75225-7808

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

Name of Employer GEICO Occupation Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014
Transaction ID : SA11AI.25616

Amount of Each Receipt this Period
60.00

Payroll deduction \$30.00 biweekly

B. Robert Miller
Full Name (Last, First, Middle Initial)

Mailing Address 3025 Amherst Avenue

City Dallas State TX Zip Code 75225-7808

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

Name of Employer GEICO Occupation Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2014
Transaction ID : SA11AI.25617

Amount of Each Receipt this Period
60.00

Payroll deduction \$30.00 biweekly

C. Olza Nicely
Full Name (Last, First, Middle Initial)

Mailing Address 5830 Pageland Ln

City Gainesville State VA Zip Code 20155-1531

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

Name of Employer GEICO Occupation President-Insurance operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014
Transaction ID : SA11AI.25637

Amount of Each Receipt this Period
200.00

Payroll deduction \$100.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Olza Nicely

Mailing Address 5830 Pageland Ln

City State Zip Code
 Gainesville VA 20155-1531

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

Name of Employer Occupation
 GEICO President-Insurance operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 05 / 22 / 2014
Transaction ID : SA11AI.25638

Amount of Each Receipt this Period
 200.00

Payroll deduction \$100.00 biweekly

Full Name (Last, First, Middle Initial)
B. Olza Nicely

Mailing Address 5830 Pageland Ln

City State Zip Code
 Gainesville VA 20155-1531

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

Name of Employer Occupation
 GEICO President-Insurance operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 06 / 19 / 2014
Transaction ID : SA11AI.25639

Amount of Each Receipt this Period
 200.00

Payroll deduction \$100.00 biweekly

Full Name (Last, First, Middle Initial)
C. Nancy Leigh Pierce

Mailing Address 100 Queen Street

City State Zip Code
 Alexandria VA 22314-2611

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

Name of Employer Occupation
 GEICO VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 04 / 24 / 2014
Transaction ID : SA11AI.25653

Amount of Each Receipt this Period
 80.00

Payroll deduction \$40.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18
	<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)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Nancy Leigh Pierce
Full Name (Last, First, Middle Initial)
Mailing Address 100 Queen Street

City Alexandria	State VA	Zip Code 22314-2611
--------------------	-------------	------------------------

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

Name of Employer GEICO	Occupation VP
---------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : SA11AI.25654

Amount of Each Receipt this Period

80.00

Payroll deduction \$40.00 biweekly

B. Nancy Leigh Pierce
Full Name (Last, First, Middle Initial)
Mailing Address 100 Queen Street

City Alexandria	State VA	Zip Code 22314-2611
--------------------	-------------	------------------------

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

Name of Employer GEICO	Occupation VP
---------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2014

Transaction ID : SA11AI.25655

Amount of Each Receipt this Period

80.00

Payroll deduction \$40.00 biweekly

C. Dana Proulx
Full Name (Last, First, Middle Initial)
Mailing Address 1011 Avery Court, S.W.

City Vienna	State VA	Zip Code 22180-6448
----------------	-------------	------------------------

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

Name of Employer GEICO	Occupation Manager
---------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2014

Transaction ID : SA11AI.25662

Amount of Each Receipt this Period

50.00

Payroll deduction \$25.00 biweekly

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Dana Proulx

Mailing Address 1011 Avery Court, S.W.

City State Zip Code
Vienna VA 22180-6448

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

Name of Employer Occupation
GEICO Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 / /
 05 / 22 / 2014
Transaction ID : SA11AI.25663

Amount of Each Receipt this Period
50.00

Payroll deduction \$25.00 biweekly

Full Name (Last, First, Middle Initial)
B. Dana Proulx

Mailing Address 1011 Avery Court, S.W.

City State Zip Code
Vienna VA 22180-6448

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

Name of Employer Occupation
GEICO Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 / /
 06 / 19 / 2014
Transaction ID : SA11AI.25664

Amount of Each Receipt this Period
50.00

Payroll deduction \$25.00 biweekly

Full Name (Last, First, Middle Initial)
C. William Roberts

Mailing Address 9413 Brooke Dr

City State Zip Code
Bethesda MD 20817-2109

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

Name of Employer Occupation
GEICO VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 / /
 04 / 24 / 2014
Transaction ID : SA11AI.25676

Amount of Each Receipt this Period
250.00

Payroll deduction \$125.00 biweekly

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. William Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 9413 Brooke Dr
 City Bethesda State MD Zip Code 20817-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 05 / 22 / 2014
Transaction ID : SA11AI.25677
 Amount of Each Receipt this Period 250.00
 Payroll deduction \$125.00 biweekly

B. William Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 9413 Brooke Dr
 City Bethesda State MD Zip Code 20817-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt 06 / 19 / 2014
Transaction ID : SA11AI.25678
 Amount of Each Receipt this Period 250.00
 Payroll deduction \$125.00 biweekly

C. George Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 5120 Highlands By The Lake Drive
 City Lakeland State FL Zip Code 33812-3083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 06 / 04 / 2014
Transaction ID : SA11AI.25754
 Amount of Each Receipt this Period 600.00
 Individual Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. George Rogers

Mailing Address 5120 Highlands By The Lake Drive

City State Zip Code
 Lakeland FL 33812-3083

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

Name of Employer Occupation
 GEICO VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 730.00

Date of Receipt
 06 / 19 / 2014
Transaction ID : SA11AI.25681

Amount of Each Receipt this Period
 20.00

Payroll deduction \$10.00 biweekly

Full Name (Last, First, Middle Initial)
B. Franklin Kelly Silva

Mailing Address 15572 Pinehurst Pl

City State Zip Code
 San Diego CA 92131-4310

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

Name of Employer Occupation
 GEICO AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 05 / 22 / 2014
Transaction ID : SA11AI.25699

Amount of Each Receipt this Period
 40.00

Payroll deduction \$20.00 biweekly

Full Name (Last, First, Middle Initial)
C. Franklin Kelly Silva

Mailing Address 15572 Pinehurst Pl

City State Zip Code
 San Diego CA 92131-4310

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

Name of Employer Occupation
 GEICO AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 06 / 19 / 2014
Transaction ID : SA11AI.25700

Amount of Each Receipt this Period
 40.00

Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Joseph Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1708 Dalwood Meadows
 City Virginia Beach State VA Zip Code 23455-4369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 24 / 2014
Transaction ID : SA11AI.25725
 Amount of Each Receipt this Period 50.00
 Payroll deduction \$25.00 biweekly

B. Joseph Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1708 Dalwood Meadows
 City Virginia Beach State VA Zip Code 23455-4369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 22 / 2014
Transaction ID : SA11AI.25726
 Amount of Each Receipt this Period 50.00
 Payroll deduction \$25.00 biweekly

C. Joseph Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1708 Dalwood Meadows
 City Virginia Beach State VA Zip Code 23455-4369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEICO Occupation AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 19 / 2014
Transaction ID : SA11AI.25727
 Amount of Each Receipt this Period 50.00
 Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	4890.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Roskam for Congress

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

Roskam for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2014

Transaction ID : SB23.25766

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

500.00

500.00
