

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

ADDRESS (number and street) ONE MASSACHUSETTS AVE NW SUITE 800
 Check if different than previously reported. (ACC)
WASHINGTON DC 20001

2. **FEC IDENTIFICATION NUMBER** C00172833
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 04 01 2008 through 06 30 2008

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 R. McLeod
Signature of Treasurer Electronically Filed by Michael R. McLeod Date 07 15 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		40100.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	50581.91									
(c) Total Receipts (from Line 19)	39950.14	58431.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	90532.05	98532.05								
7. Total Disbursements (from Line 31)	40500.00	48500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50032.05	50032.05								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	25375.00	38500.00
(i) Itemized (use Schedule A)	14535.00	19845.00
(ii) Unitemized	39910.00	58345.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	39910.00	58345.00
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.)	40.14	86.26
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))	39950.14	58431.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39950.14	58431.26

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.....	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.....	40500.00	48500.00
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))..	40500.00	48500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40500.00	48500.00

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	39910.00	58345.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39910.00	58345.00
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: (check only one)	PAGE 6 / 30
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Grant Adams		Date of Receipt
	Mailing Address 3214 S. Ong		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Amarillo	TX	79109
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5780
Name of Employer Producers Ag Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 495.00

B.	Full Name (Last, First, Middle Initial) Jimmy Armistead		Date of Receipt
	Mailing Address 2124 Memorial Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Clarksville	TN	37043
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5775
Name of Employer Tennessee Valley Crop Ins		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 245.00

C.	Full Name (Last, First, Middle Initial) Ron Brichler		Date of Receipt
	Mailing Address 3681 Tiffany Ridge Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Cincinnati	OH	45241
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5794
Name of Employer Great American Insurance Co.		Occupation President-Crop Div.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3240.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 30
(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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Steve Carthel

Mailing Address 6606 Roxton

City Amarillo State TX Zip Code 79109

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

Name of Employer Rain & Hail, LLC Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt: 04 / 08 / 2008
Transaction ID: SA11AI.5754
 Amount of Each Receipt this Period: 395.00

B.

Full Name (Last, First, Middle Initial)
Barry Cermak

Mailing Address 1221 Victoria Circle

City Norwalk State IA Zip Code 50211

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

Name of Employer Producers Ag Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.5786
 Amount of Each Receipt this Period: 495.00

C.

Full Name (Last, First, Middle Initial)
Darren Chase

Mailing Address 6139 St. Road 25 South

City West Point State IN Zip Code 47992

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

Name of Employer Great American Insurance Occupation Indiana Field Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.5776
 Amount of Each Receipt this Period: 245.00

SUBTOTAL of Receipts This Page (optional) ► **1135.00**

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 / 30
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Douglas A Clark		Date of Receipt
	Mailing Address 298 S. 4th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 7 / 2 0 0 8
	City	State	Zip Code
	Sheldon	IL	60966
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5791
Name of Employer Owner		Occupation Clark Insurance Agency Inc.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Mark Classen		Date of Receipt
	Mailing Address 400 Navajo Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 8 / 2 0 0 8
	City	State	Zip Code
	Medina	MN	55340
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5753
Name of Employer Rain & Hail, LLC		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 395.00
		<input type="text"/> 395.00	

C.	Full Name (Last, First, Middle Initial) Danette Coleman		Date of Receipt
	Mailing Address 3514 Robin Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 6 / 2 0 0 8
	City	State	Zip Code
	Salem	IL	62881
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5763
Name of Employer Crop Insurance Services		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 245.00
		<input type="text"/> 245.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 890.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Michael Connealy
 Mailing Address 463 Waycliffe North
 City State Zip Code
 Wayzata MN 55391
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8
Transaction ID: SA11AI.5773
 Amount of Each Receipt this Period
 495.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Producers Ag Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

B. Full Name (Last, First, Middle Initial)
 Timothy D Copeland
 Mailing Address 10866 Arcaro Lane
 City State Zip Code
 Union KY 41091
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8
Transaction ID: SA11AI.5789
 Amount of Each Receipt this Period
 400.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Great American Ins Co Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

C. Full Name (Last, First, Middle Initial)
 Larry Copes
 Mailing Address 1299 Hurt Road
 City State Zip Code
 Pioneer LA 71266
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 5 / 2 0 0 8
Transaction ID: SA11AI.5792
 Amount of Each Receipt this Period
 245.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Producers Ag Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

SUBTOTAL of Receipts This Page (optional) ► 1140.00
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 / 30
(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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Kent Dale

Mailing Address 3911 Puffin Way

City State Zip Code
College Station TX 77845

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

Name of Employer Rain & Hail Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
04 / 08 / 2008

Transaction ID: SA11AI.5756

Amount of Each Receipt this Period
245.00

B.

Full Name (Last, First, Middle Initial)
Lysle A. Davidson

Mailing Address Box 418

City State Zip Code
Johnson KS 67855

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

Name of Employer Western Shelter Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2995.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2008

Transaction ID: SA11AI.5770

Amount of Each Receipt this Period
2995.00

C.

Full Name (Last, First, Middle Initial)
Jay K. Douglas

Mailing Address 10100 Ottobahn

City State Zip Code
Amarillo TX 79119

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

Name of Employer Producers Ag Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.5784

Amount of Each Receipt this Period
495.00

SUBTOTAL of Receipts This Page (optional) ► **3735.00**

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 11 / 30
(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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Carroll Dunn

Mailing Address 2111 S. Bowie

City Amarillo State TX Zip Code 79109

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

Name of Employer Producers Ag Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt 05 / 02 / 2008

Transaction ID: SA11AI.5783

Amount of Each Receipt this Period 495.00

B.

Full Name (Last, First, Middle Initial)
Richard S. Fagley

Mailing Address 1585 Searight Drive

City Pleasant Hill State IA Zip Code 50327

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

Name of Employer Rain & Hail Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 09 / 2008

Transaction ID: SA11AI.5759

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Chris Fisher

Mailing Address 4305 159th Street

City Urbandale State IA Zip Code 50323

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

Name of Employer Great American Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2008

Transaction ID: SA11AI.5793

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 1045.00

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 / 30

(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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Charles L. Goode

Mailing Address 704 Davidson Street

City State Zip Code
Raleigh NC 27609

FEC ID number of contributing federal political committee.

C

Name of Employer
Rain & Hail, LLC

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.5767

Amount of Each Receipt this Period

395.00

B.

Full Name (Last, First, Middle Initial)

William Haar

Mailing Address PO Box 5635

City State Zip Code
Fresno CA 93755

FEC ID number of contributing federal political committee.

C

Name of Employer
Producers Ag Insurance

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.5760

Amount of Each Receipt this Period

995.00

C.

Full Name (Last, First, Middle Initial)

Brenda Haney

Mailing Address 1820 S. 9th Lane

City State Zip Code
West Des Moines IA 50265

FEC ID number of contributing federal political committee.

C

Name of Employer
Rain & Hail

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.5750

Amount of Each Receipt this Period

995.00

SUBTOTAL of Receipts This Page (optional)

2385.00

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 / 30
	<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	

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Mr. Steve Harms		Date of Receipt MM / DD / YYYY 04 / 09 / 2008		
	Mailing Address 4120 Timberwood Dr		Transaction ID: SA11AI.5758		
	City West Des Moines	State IA	Zip Code 50265	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rain & Hail, LLC	Occupation Exec. VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Gary B. Helms		Date of Receipt MM / DD / YYYY 04 / 08 / 2008		
	Mailing Address 3509 3rd Ave.		Transaction ID: SA11AI.5755		
	City Kearney	State NE	Zip Code 68845	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rain & Hail Insurance	Occupation Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Adam Hilton		Date of Receipt MM / DD / YYYY 05 / 02 / 2008		
	Mailing Address 343 Hilcox Lane		Transaction ID: SA11AI.5787		
	City Thomasville	State NC	Zip Code 27360	Amount of Each Receipt this Period 245.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Producers Ag Insurance	Occupation Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1490.00
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 14 / 30
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Kendall Jones		Date of Receipt
	Mailing Address 9034 Lockmere Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Brentwood	TN	37027
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5777
Name of Employer Producers Ag Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 495.00

B.	Full Name (Last, First, Middle Initial) Joan Kelley		Date of Receipt
	Mailing Address 3910 Brockton Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Cincinnati	OH	45251
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5788
Name of Employer Great American Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 295.00

C.	Full Name (Last, First, Middle Initial) Jerry D. Kincade		Date of Receipt
	Mailing Address PO Box 254		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 8 / 2 0 0 8
	City	State	Zip Code
	Winterset	IA	50273
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5749
Name of Employer Rain & Hail, LLC		Occupation VP & Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 495.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1285.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 30
(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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
Brian J. Laird

Mailing Address 501 W. Enterprise Ave.

City Clovis State CA Zip Code 93611

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

Name of Employer Rain & Hail Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt: 04 / 16 / 2008
Transaction ID: SA11AI.5764
Amount of Each Receipt this Period: 395.00

B. Full Name (Last, First, Middle Initial)
Brandon Latham

Mailing Address 2210 Milam

City Amarillo State TX Zip Code 79109

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

Name of Employer Producers Lloyds Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt: 04 / 16 / 2008
Transaction ID: SA11AI.5761
Amount of Each Receipt this Period: 495.00

C. Full Name (Last, First, Middle Initial)
Jess B. Latham

Mailing Address 2605 S. Hughes Street

City Amarillo State TX Zip Code 79109

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

Name of Employer Producers Ag Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.5781
Amount of Each Receipt this Period: 495.00

SUBTOTAL of Receipts This Page (optional) ► 1385.00

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 16 / 30
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial) Jess Ben Latham		Date of Receipt MM / DD / YYYY 04 / 09 / 2008
Mailing Address Box 229		Transaction ID: SA11AI.5757
City Amarillo	State TX	Zip Code 79105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Producers Lloyds Ins Co	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Larry Latham		Date of Receipt MM / DD / YYYY 05 / 02 / 2008
Mailing Address P.O. Box 229		Transaction ID: SA11AI.5782
City Amarillo	State TX	Zip Code 79105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 995.00
Name of Employer Producers Lloyds Ins Co	Occupation Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 995.00	

C.

Full Name (Last, First, Middle Initial) Leigh Ann Malcom		Date of Receipt MM / DD / YYYY 04 / 16 / 2008
Mailing Address 2300 Liberty Hill Church Rd		Transaction ID: SA11AI.5765
City Monroe	State GA	Zip Code 30655-2051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 495.00
Name of Employer Rain & Hail Insurance	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

SUBTOTAL of Receipts This Page (optional)	▶	2490.00
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 17 / 30
	<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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) Linda M. Miller	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 458 Lake Road NE	Transaction ID: SA11AI.5778
	City State Zip Code Lancaster OH 43130	Amount of Each Receipt this Period 245.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Producers Ag Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

B.	Full Name (Last, First, Middle Initial) Ryan D. Miller	Date of Receipt MM / DD / YYYY 04 / 08 / 2008
	Mailing Address 3417 Eula Drive	Transaction ID: SA11AI.5752
	City State Zip Code Urbandale IA 50322	Amount of Each Receipt this Period 395.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail, LLC Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	

C.	Full Name (Last, First, Middle Initial) William G. Moore	Date of Receipt MM / DD / YYYY 04 / 16 / 2008
	Mailing Address 1603 Vinings Court	Transaction ID: SA11AI.5766
	City State Zip Code Lawrenceville GA 30043	Amount of Each Receipt this Period 245.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rain & Hail Insurance Marketing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional)	885.00
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 18 / 30

(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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Terry L. Peniston

Mailing Address 1024 Watermill Lane

City State Zip Code
Lexington KY 40515

FEC ID number of contributing federal political committee.

C

Name of Employer
FCIA

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.5774

Amount of Each Receipt this Period

995.00

B.

Full Name (Last, First, Middle Initial)

Stephen D. Sims

Mailing Address 4301 Grand Prix Dr

City State Zip Code
Logansport IN 46947-0008

FEC ID number of contributing federal political committee.

C

Name of Employer
Dick Sims Agency, Inc.

Occupation
Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.5769

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Paul Vandiver

Mailing Address 40125 Jingo Road

City State Zip Code
LaCygne KS 66040

FEC ID number of contributing federal political committee.

C

Name of Employer
Rain & Hail Insurance

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.5768

Amount of Each Receipt this Period

395.00

SUBTOTAL of Receipts This Page (optional)

1690.00

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 19 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
 Brad Veenstra
 Mailing Address 1242 145th St
 City Pella State IA Zip Code 50219
 Date of Receipt 05 / 07 / 2008
Transaction ID: SA11AI.5790
 Amount of Each Receipt this Period 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Great American Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
 Kathy Verbrugge
 Mailing Address 353 139th Lane, NW
 City Andover State MN Zip Code 55304
 Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.5779
 Amount of Each Receipt this Period 495.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Producers Ag Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 495.00

C. Full Name (Last, First, Middle Initial)
 Dale Vogt
 Mailing Address 3412 Golf Road
 City Eau Claire State WI Zip Code 54701
 Date of Receipt 04 / 23 / 2008
Transaction ID: SA11AI.5771
 Amount of Each Receipt this Period 400.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FCIA Occupation Asst. Claims Adjuster
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

SUBTOTAL of Receipts This Page (optional) ► **1195.00**
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 20 / 30
(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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
Margaret Waters

Mailing Address 1582 Gulf Blvd #1304

City State Zip Code
Clearwater Beach FL 33767

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

Name of Employer Occupation
Producers Ag Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.5785

Amount of Each Receipt this Period
495.00

B.

Full Name (Last, First, Middle Initial)
Kris L. Wedel

Mailing Address 5708 South Custer

City State Zip Code
Spokane WA 99223

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

Name of Employer Occupation
Rain & Hail Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
04 / 08 / 2008

Transaction ID: SA11AI.5751

Amount of Each Receipt this Period
395.00

C.

Full Name (Last, First, Middle Initial)
Rob Young

Mailing Address 1016 Highland Ave.

City State Zip Code
Richmond KY 40475

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

Name of Employer Occupation
Producers Ag Insurance Claims Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2008

Transaction ID: SA11AI.5762

Amount of Each Receipt this Period
495.00

SUBTOTAL of Receipts This Page (optional)	▶	1385.00
TOTAL This Period (last page this line number only)	▶	25375.00

**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 21 / 30

<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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
13TH COLONY LEADERSHIP COMMITTEE, INC.

Mailing Address P. O. Box 114

City Savannah State GA Zip Code 31402

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB23.5675

Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
BOB GOODLATTE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 292

City Roanoke State VA Zip Code 24002

Purpose of Disbursement

Candidate Name
ROBERT W GOODLATTE

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: VA District: 06

Transaction ID: SB23.5670

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
BOSWELL FOR CONGRESS

Mailing Address PO Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement

Candidate Name
LEONARD L. BOSWELL

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: IA District: 03

Transaction ID: SB23.5678

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS <hr/> Mailing Address PO BOX 177 <hr/> City BOONEVILLE State MS Zip Code 38829 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name TRAVIS W CHILDERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5711 Date of Disbursement <input type="text" value="06"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CITIZENS FOR COCHRAN <hr/> Mailing Address PO BOX 7183 <hr/> City TUPELO State MS Zip Code 38802 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name THAD COCHRAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5653 Date of Disbursement <input type="text" value="04"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CONAWAY FOR CONGRESS <hr/> Mailing Address PO Box 51272 <hr/> City Midland State TX Zip Code 79710 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name K MICHAEL CONAWAY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5708 Date of Disbursement <input type="text" value="06"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
EARL POMEROY FOR CONGRESS

Mailing Address PO Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement

Candidate Name
EARL RALPH POMEROY

Office Sought: House
 Senate
 President

State: ND District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5654

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ELLSWORTH FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 62

City Evansville State IN Zip Code 47701

Purpose of Disbursement

Candidate Name
BRAD ELLSWORTH

Office Sought: House
 Senate
 President

State: IN District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5714

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement

Candidate Name
BLANCHE LAMBERT LINCOLN

Office Sought: House
 Senate
 President

State: AR District: 01

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5669

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

1000.00

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)

<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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
JOHN SALAZAR FOR CONGRESS

Mailing Address P.O. Box 534

City Pueblo State CO Zip Code 81002

Purpose of Disbursement

Candidate Name
JOHN TONY SALAZAR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 03

Transaction ID: SB23.5652

Date of Disbursement

04 / 07 / 2008

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
KAGEN 4 CONGRESS

Mailing Address 100 W. College Ave.
50 D

City Appleton State WI Zip Code 54911

Purpose of Disbursement

Candidate Name
STEVEN L KAGEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WI District: 08

Transaction ID: SB23.5701

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
LAMPSON FOR CONGRESS

Mailing Address P.O. Box 58606

City Houston State TX Zip Code 77258

Purpose of Disbursement

Candidate Name
NICHOLAS V LAMPSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 22

Transaction ID: SB23.5697

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 26 / 30

<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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)
LINCOLN DAVIS FOR CONGRESS

Mailing Address PO BOX 350

City JAMESTOWN State TN Zip Code 38556

Purpose of Disbursement

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.5698

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MARION BERRY FOR CONGRESS

Mailing Address P.O. BOX 8084
P.O. BOX 8084

City JONESBORO State AR Zip Code 72403

Purpose of Disbursement

Candidate Name
MARION BERRY

Office Sought: House
 Senate
 President

State: AR District: 01

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.5668

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
MARSHALL, JIM

Mailing Address PO BOX 125

City MACON State GA Zip Code 31202

Purpose of Disbursement

Candidate Name
JIM MARSHALL

Office Sought: House
 Senate
 President

State: GA District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.5723

Date of Disbursement

04 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

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)

<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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
MIKE MCINTYRE FOR CONGRESS

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement

Candidate Name
MIKE MCINTYRE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 07

Transaction ID: SB23.5657

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
MORAN FOR KANSAS

Mailing Address P.O. Box 1151

City Hays State KS Zip Code 67601

Purpose of Disbursement

Candidate Name
JERRY MORAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KS District: 01

Transaction ID: SB23.5661

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
NANCY BOYDA FOR CONGRESS

Mailing Address PO Box 1474

City Topeka State KS Zip Code 66601

Purpose of Disbursement

Candidate Name
NANCY E E BOYDA

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KS District: 02

Transaction ID: SB23.5707

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) NELSON 2012 Mailing Address PO BOX 8666 City OMAHA State NE Zip Code 68108 Purpose of Disbursement <input type="checkbox"/> Candidate Name E BENJAMIN NELSON Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5664 Date of Disbursement 05 / 20 / 2008 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) SENATE VICTORY FUND PAC, THE Mailing Address PO BOX 7274 City TUPELO State MS Zip Code 38802 Purpose of Disbursement <input type="checkbox"/> Candidate Name SENATE VICTORY FUND PAC, THE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5656 Date of Disbursement 04 / 17 / 2008 Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA Mailing Address PO Box 2009 City Sioux Falls State SD Zip Code 57101 Purpose of Disbursement <input type="checkbox"/> Candidate Name STEPHANIE HERSETH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5667 Date of Disbursement 05 / 21 / 2008 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) TEXANS FOR SENATOR JOHN CORNYN INC	Transaction ID: SB23.5722 Date of Disbursement 04 / 23 / 2008	
	Mailing Address 6850 AUSTIN CENTRE BLVD SUITE 180		
	City AUSTIN State TX Zip Code 78731	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name JOHN CORNYN	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) TIM JOHNSON FOR SOUTH DAKOTA INC	Transaction ID: SB23.5677 Date of Disbursement 06 / 10 / 2008	
	Mailing Address PO BOX 1536		
	City SIOUX FALLS State SD Zip Code 57101	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name TIM JOHNSON	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) TIM MAHONEY FOR FLORIDA	Transaction ID: SB23.5693 Date of Disbursement 06 / 19 / 2008	
	Mailing Address 4114 Northlake Blvd Ste 300		
	City Palm Beach Gardens State FL Zip Code 33410	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name TIM MAHONEY	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)
AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.	Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS	Transaction ID: SB23.5682 Date of Disbursement
	Mailing Address PO Box 938	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Mankato State MN Zip Code 56002	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name TIMOTHY J WALZ	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: MN District: 01	

B.	Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMITTEE	Transaction ID: SB23.5685 Date of Disbursement
	Mailing Address 123 West High Avenue	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City New Philadelphia State OH Zip Code 44663	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name ZACHARY T SPACE	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: OH District: 18	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="40500.00"/>